

**FINANCIAL RECORDS
FIRMS BILLING REQUEST**

Information required to issue billing:

- Complete **NAME** of Individual/Company to be billed
- Complete **ADDRESS** of where bill is to be mailed
- **CONTACT NAME** of someone in the company
- **EMAIL address** of vendor contact and/or billing EMAIL address
- If company requires it, provide THEIR **PURCHASE ORDER NUMBER**
- **DESCRIPTION** of item or services we are billing for
- **AMOUNT** to be billed
- Your **AU ACCOUNT NUMBER** (department GL #) to be credited. If you know the AR Detail Code, please provide that
- Include any **ATTACHMENTS** you want sent with the billing
- Your **AU CONTACT INFORMATION** as the individual requesting Firms to issue a bill.

EMAIL THE REQUIRED INFORMATION TO: FIRMS@ANDREWS.EDU

OR: INTERCAMPUS MAIL TO FIRMS 0780

**** IMPORTANT **** If payment is mailed to you/your department in error, please **DO NOT** deposit the check. Forward the check to **FIRMS DEPT 0780** to be deposited in order to clear the outstanding balance of the bill. (Otherwise your customer might receive another bill.)