



UNIVERSITY OF NORTH CAROLINA WILMINGTON

### Direct Pay Invoice Vendor Setup Form

- \* Before submitting a Direct Pay Invoice, review the [Expenditure Guidelines](#) to determine correct process (uShop or Chrome River) for payment.
- \* **Legal name is required for setup purposes - First, Middle, Last, Suffix**
- \* Prior to completing a new vendor form, confirm the vendor does not already exist in Chrome River. Search for the vendor by last name in the vendor field of the Direct Pay Invoice. Consider acronyms and abbreviations in your search. Review multiple addresses thoroughly.
- \* Vendors should be directed to the Docusign link [HERE](#) to complete and submit a W9.
- \* Attach the new vendor form directly to the Direct Pay invoice being submitted.
- \* Refund/Reimbursement Information section is used for refunding or reimbursing individuals by adding a new vendor AP address or updating an existing address. No W9 required.
- \* Vendor/Payee Information section is used to make payment to new vendors.

#### Employee Information:

Legal Name: \_\_\_\_\_ UNCW ID Number: 850  
Full legal name including suffix

Department Name: \_\_\_\_\_ Campus Box #: \_\_\_\_\_

Building Name & Office Number: \_\_\_\_\_

#### Refund/Reimbursement:

Vendor/Payee's Legal Name: \_\_\_\_\_  
Full legal name including suffix

UNCW ID Number: 850 Phone Number: \_\_\_\_\_

Payment Street Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_ Email Address: \_\_\_\_\_

Is this an address change?      Yes      No

#### Vendor/Payee Information:

Vendor/Payee's Legal Name: \_\_\_\_\_  
Full legal name including suffix

Payment Street Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Email Address: \_\_\_\_\_ Website Name: \_\_\_\_\_