

SUL ROSS STATE UNIVERSITY

OUTLINE OF SERVICES

This form should accompany requisitions for services unless detailed information is included on the requisition or other documentation is provided. (i.e., contract, quote form)

Vendor Name: _____

Mailing Address: _____

Telephone # _____ Fax # _____

Provide detailed information on services to be performed. Include all essential information:

Provide specific date(s) (if applicable) and location(s) of services:

Indicate fee to be paid and any special payment instructions. Unless otherwise stated, payments will be made within 30 days after receipt of invoice and verification of services being completed:

Estimation of travel and other expense reimbursements to be paid if not included in the above fee. (If individual is an employee of the State of Texas, they must complete a travel voucher in order to receive travel expense reimbursements.):