



**DIRECT CHARGE WORKSHEET**

**AS580**

This form must be completed to provide the related FDM worktags and spend category for direct charge invoices. **The direct charge invoice must be attached to this form.**

Request Date \_\_\_\_\_

<b>***Fiscal Year End Accrual</b>	
<input type="checkbox"/> Yes	<input type="checkbox"/> No

Company		Department		Contact	
Phone		Fax		E-Mail	

Supplier/Payee		Document Number	
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Purpose of Purchase	
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Spend Category	Amount	Program	Project	Gift	Grant	Cost Center	Fund	Function	Additional Worktags
Invoice Total									

I certify the attached invoice adheres to *PRO-U525.A, Exceptions to the Competitive Solicitation Process* and will be processed as a Direct Charge payment.

\_\_\_\_\_  
 Authorized Signature