THE UNIVERSITY OF TEXAS RIO GRANDE VALLEY
ePay Request Form

This form is used by a department to request the ability to accept payment by credit card via on line system. Completed **form should be routed through the Account/Project Manager or designee, then emailed to Treasury@utrgv.edu**. For questions, call 956/665-7378, 665-3623.

Department Requesting ePay Service Privileges: _____

Purpose for ePay Service: _____

Please use the following GL string to receipt monies received:

Speed Type	Program Code	Account	Function	Fund	Department	Cost Center/Project Name
			999			
			999			
			999			
			999			

Cost Center/Project Name: _____

Contact Person at Department: _____

Campus Address: _____

Campus Phone Number: _____

Other Additional Comments

_____

_____   _____
Account Manager Approval   Date

For Treasury and BA Use Only:

Please set up transaction type in I-payment test for: _____

Transaction Type Name: _____

Transaction Type Accounting Information: _____

Account Offsetting Entry: _____

Fund Type Description: _____

Merchant: **4201-000-20001**

_____   _____
Treasury Approval   Date

REV. 6/13/2019