

## RCCD

## Accrual Form- VP of Business Services Approved -No Invoice

This form allows you to designate an amount due to a vendor for goods or services that were received or rendered, but not yet billed by June 30.

Please be aware that missing information will result in a return of the accrual form. Attach any related vendor documents, emails, and related materials.

Date: \_\_\_\_\_

PO/Contract#: \_\_\_\_\_

Vendor Number: \_\_\_\_\_ Vendor Name: \_\_\_\_\_

Amount to accrue: \_\_\_\_\_

Goods/Services received before 06/30/24 ☐ Yes ☐ No Expected Invoice Date \_\_\_\_\_

Monthly Recurring Charge ☐ Yes ☐ No

**IMPORTANT.** Please provide an explanation and attach any additional information regarding the need for this vendor payment accrual request.

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The request detailed above represents a payment obligation for the District as of 06/30/2025 [Fiscal Year 2025] and by submitting this form I certify that the accrual is accurate, complete, and understand that this accrual will be reflected in the District's financial statements for FY 2025. I am providing all the necessary information and documents.

Contact Name \_\_\_\_\_

Requestor Name \_\_\_\_\_

Dean/Dept. Manager Name \_\_\_\_\_ Date \_\_\_\_\_

Dean/Dept. Manager Approval \_\_\_\_\_

If the accrual amount is more than \$1,000 the following signatures are required.

V.P. Business Services Approval \_\_\_\_\_ Date \_\_\_\_\_

Controller Approval \_\_\_\_\_

**Due to College Business Services and Accounts Payable no later July 15, 2025**