



Uniform Allowance Inquiry

Instructions

1. Forward original to the St. Louis Accounting Service Center (ASC). District coordinators should retain one copy.
2. Complete all applicable items to enable the ASC to thoroughly research and reply.
3. The ASC WILL NOT reply directly to the vendor.
4. Point to remember at district level: Allow 3-5 weeks for completion.

TO:

UNIFORM ALLOWANCE SECTION
 ACCOUNTS PAYABLE BRANCH
 ACCOUNTING SERVICE CENTER
 PO BOX 80106
 ST LOUIS MO 63180-0106

Check One

- Inquiry from vendor enclosed. (Blocks A and B below are completed.)
- Other (Explain below).

Other

NOTE: Blocks "A" and "B" MUST state the data in the way it should be or should have been recorded.

A. EMPLOYEE

Name (First Name, Middle Initial, and Last Name)	Social Security No.	Ann. Date	Designation Activity	Pay Loc
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B. VENDOR

Name and Address (Include Apt./Suite No.)	License No.	Invoice No.
	Invoice Date	Invoice Amount

RETURN TO:

UNIFORM ALLOWANCE COORDINATOR
 DISTRICT ADDRESS

I CERTIFY THAT BLOCKS A AND/OR B ARE CORRECT

Signature and Date

Telephone No. (Include Area Code)

Finance No.

District