



**MULTI-PAYEE VOUCHER DETAIL (MVD)
LOCAL FUNDS ONLY**

Texas A&M AgriLife
Research
556 RESEARCH

Texas A&M AgriLife Extension
Service
555 EXTENSION

TVMDL
557 TVMDL

Hotel Name _____ Date _____ Amount \$ _____

EXPENSES PAID BY: Name _____

Vendor ID # _____ FAMIS Acct # _____

Signature _____

FOR THE FOLLOWING INDIVIDUALS:

Name _____ Vendor ID # _____

Signature _____

Name _____ Vendor ID # _____

Signature _____

Name _____ Vendor ID # _____

Signature _____

Name _____ Vendor ID # _____

Signature _____