

Check Request

Payable to: _____
Address: _____

Date Requested: _____
Date Required: _____
_____ Mail Check
_____ Mail Check w/ attachment
_____ Hold check for pick-up
_____ ACH

Amount: \$ _____ GL Number: _____

Purpose: _____

Requested By: _____ VP Signature: _____

Budget Office Approval: _____ Approved/Date: _____

****Original documentation must be attached****

DO NOT COPY