**Revised 073018**

**CHECK REQUEST FORM**

|  |  |
| --- | --- |
| **DATE OF REQUEST:** |       |

|  |  |
| --- | --- |
| **VENDOR NUMBER:** |       |

|  |  |
| --- | --- |
| **VENDOR NAME:** |       |

|  |  |
| --- | --- |
| **PERSON MAKING REQUEST:** |       |

|  |  |
| --- | --- |
| **ACCOUNT NUMBER(S)** | **AMOUNT** |
|       | $      |
|       | $      |
|       | $      |
|       | $      |
|       | $      |
|       | $      |
|       | $      |
|       | $      |
| **CHECK TOTAL** | **$** |

**INVOICE NUMBER OR REASON FOR REQUEST:**

|  |
| --- |
|  |

**TAX EXEMPT LETTER NEEDED:** Choose an item.

**MAIL CHECK?** Choose an item.

**APPROVAL**

**ADMINISTRATOR/DEPARTMENT HEAD:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**DATE:**  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**BUSINESS MANAGER:**  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**DATE:**  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

***REQUESTS ARE DUE TO ACCOUNTS PAYABLE BY 1:00 PM ON THURSDAYS. CHECKS ARE PRINTED ON MONDAYS AND WILL BE RETURNED TO THE REQUESTOR ONCE PRINTED UNLESS INDICATED TO MAIL. ANY REQUESTS RECEIVED AFTER THE CUTOFF WILL BE PROCESSED THE FOLLOWING MONDAY.***

***----------print on pink paper-------***