

CHECK REQUISITION FORM

DATE: _____

WORK AREA _____

*GL CODE _____

*GENERAL LEDGER CODE IS REQUIRED

PAY TO THE ORDER OF: _____

ADDRESS: _____

DISTRIBUTION: MAIL TO PAYEE ()

WILL BE PICKED UP ()

BOX ()

OTHER ()

EXPLANATION: _____

CHECK AMOUNT: _____

REQUESTED BY: _____

AUTHORIZED BY: _____

PLEASE ATTACH SUPPORTING RECEIPTS, INVOICES, ETC.

ALL VENDORS MUST HAVE A W-9 ON FILE. CHECKS WILL NOT BE RELEASED WITHOUT ONE.

SALES TAX IS NOT REIMBURSABLE