

REQUEST FOR CHECK – WILLAMETTE UNIVERSITY

DATE: _____

AMOUNT \$ _____

PAY TO: _____

ACCT # _____

ADDRESS:

Delivery Instructions:

- MAIL CHECK – ENCLOSURE
- PICK UP @ ACCOUNTING WINDOW
- RETURN/CAMPUS MAIL TO:

Box# or DEPT: _____

Attn: _____
(if different than payee)

PAYMENT PURPOSE:

REQUESTED BY: _____

PHONE: _____

<p>BUDGET OFFICER APPROVAL:</p> <p>Signature: _____</p> <p>Print Name: _____</p> <p><i>The budget approver cannot be the same as the payee. In those instances, the direct supervisor or another officer needs to approve the request.</i></p>

Attach all original receipts or invoice(s). For credit card transactions, please attach the detailed vendor receipts rather than the more general charge transaction slips. For more information see the Travel Policy and Business Expense Policy.

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