



Date: \_\_\_\_\_

Check #: \_\_\_\_\_

## Check Request

**Make Check Payable to:**

Vendor Name: \_\_\_\_\_ Vendor # \_\_\_\_\_

Address: \_\_\_\_\_

City, State, Zip Code: \_\_\_\_\_

\*Reminder - No taxes may be charged

(You may attach an invoice or order form instead of filling in the information below.)

QUANTITY	DESCRIPTION OF ITEM(S) PURCHASED	PRICE OF ITEM(S)	TOTAL AMOUNT
		\$	\$
		\$	\$
		\$	\$
		\$	\$
		\$	\$
		\$	\$
		\$	\$
		\$	\$
		\$	\$
		\$	\$
		\$	\$
		\$	\$
		\$	\$
		\$	\$
		\$	\$
<b>Total Amount of Check</b>			<b>\$</b>

Reason/Purpose for Purchase: \_\_\_\_\_

Requested By (Faculty/Staff Member): \_\_\_\_\_

Print Name: \_\_\_\_\_

School Fund Name: \_\_\_\_\_ Fund # \_\_\_\_\_

Order Approved by (Administrator Signature): \_\_\_\_\_

Date Approved: \_\_\_\_\_

*Fill out form and turn it in to Patsy Cathcart, Bookkeeper, along with any quote and/or supporting documents.  
NO REIMBURSEMENTS WILL BE MADE WITHOUT PRIOR APPROVAL OF PURCHASE*

MUNIS DESCRIPTION: \_\_\_\_\_ (Bookkeeper Use Only)