



Check Request Form

Date: _____

Amount: \$_____

**** All receipts must be attached for
all purchases and returned to the Foundation
within 24 hours of check out ****

Check payable to:	
Foundation credit card was used at: <i>(list all places card was used)</i>	
Reason for Check/Credit Card Purchase:	
Foundation Account to Charge:	
Requested by:	
Dean or Department Chair Approval:	
President or Vice President Approval: <i>(only needed if the request is from a Dean or Department Chair)</i>	

Special Instructions for Checks:

Send Check to:	
Need Check by:	
Send Check to the following address:	