

# CHECK REQUISITION

To: PAYROLL

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

**SUU** SOUTHERN  
UTAH  
UNIVERSITY

## INSTRUCTIONS:

1. This form is **NOT** to be used in lieu of a purchase order requisition, travel advance/reimbursement or for items that could be interpreted as wages.
2. Any payment made to a business or individual for services must include the taxpayer identification or Banner T-number in the space provided and a completed W-9 from the vendor if one is not on file.
3. The check will be mailed to the payee at the address shown (an address is required). If you want the check to be held at the Controllers Office, to be picked up by the payee, mark an "X" in the hold box.
4. If you have any communication or attachments to accompany the check, attach them to this form.
5. Documentation **MUST** be attached to this form.

## PAYEE

Name \_\_\_\_\_

Address \_\_\_\_\_  
\_\_\_\_\_

City & State \_\_\_\_\_

Zip Code \_\_\_\_\_

Banner T # \_\_\_\_\_

(T# REQUIRED)

## EXPLANATION:

Index 1: \_\_\_\_\_ Amount: \_\_\_\_\_

Index 2: FREL \_\_\_\_\_ Amount: \_\_\_\_\_

Total Amount \$ \_\_\_\_\_

Index 1

Index \_\_\_\_\_ Acct \_\_\_\_\_ Actv \_\_\_\_\_

Fund \_\_\_\_\_ Org \_\_\_\_\_ Acct \_\_\_\_\_ Prog \_\_\_\_\_

Index 2

Index FREL \_\_\_\_\_ Acct \_\_\_\_\_ Actv \_\_\_\_\_

Fund \_\_\_\_\_ Org \_\_\_\_\_ Acct \_\_\_\_\_ Prog \_\_\_\_\_

Department \_\_\_\_\_

Authorized by \_\_\_\_\_

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

Dean or Dept. Head \_\_\_\_\_

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

Vice President \_\_\_\_\_

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

Purchasing Agent \_\_\_\_\_

Copy 3 to Issuing Department