

CHECK REQUISITION

To: ACCOUNTS PAYABLE

Date: _____



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 Candidate Info goes here

HOLD []

Address

Hold Name:

City & State

Hold Email:

Hold Phone:

Zip Code

Banner T #

(T# REQUIRED)

EXPLANATION:

Travel Expenses for Candidate, brought in to interview for (position name)

Flight: \$250

Shuttle: \$50

Total: \$300

Amount \$ 300.00

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Department

Fund Org Acct Prog

Authorized by Your name goes here Print Name

Dean or Dept. Head Your Dean signs here Print Name

Vice President Bring this to Provost's Office for Signature (we'll submit it to Accounts Payable) Print Name

Purchasing Agent

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PAYEE Name Faculty Names goes here

HOLD []

Address

Hold Name:

City & State

Hold Email:

Hold Phone:

Zip Code

Banner T # You must include this

(T# REQUIRED)

EXPLANATION:

Reimbursements for dinner costs associated with campus interview of (Candidate Name) for the position of (position name)

Flight: \$250 A Business Meal & Non-Instructional Food Certification Form is attached.

Shuttle: \$50 (You can get this at: https://www.suu.edu/ad/purchasing/Business%20Meal%20and%20Grocery%20Form1.pdf Please get all signature for the form, list all attendees, and include an itemized receipt)

Total: \$300

Amount \$ 35.00

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