



A/P Check Request

Date: _____

Pay to: _____

Address: _____

Attention: _____

Account _____

\$ _____
Amount

Request Justification:

Requested By: _____ Date: _____

Budget Administrator: _____ Date: _____

Purchasing Signature: _____ Date: _____

*This Request is not to be used in lieu of a Purchase Requisition,
Contracted Service Form, or Adjunct Teaching Agreement.*