



For CARA Use Only:

Check Request Form

All check requests must include acceptable documentation (Invoice, Detailed receipt(s), Registration and payment confirmation, etc.) before a payment will be processed

Date

Payable to Name

Payable to Address

Dollar amount

\$

Account # to be charged

Description of expense

For questions regarding this check request, contact:

Check distribution:

USPS to Payee

Campus Mail to Department or Residence Hall

Special request - describe _____

Name

Phone Number

Authorized signature

I certify that the above items have been received or the services performed, and that the funds are available from the account indicated above.

Printed name of Authorized Signer

Title of Authorized Signer

Phone number