

**Student Organization  
Check Request Form**

- \* fill in the entire form except for the "Approved for Payment" box in Part B.
- \* print or type legibly.
- \* include receipt/invoice (original copy preferred).
- \* after completion submit form to Office of Student Affairs.

Part A

Date \_\_\_\_\_

This is a request by \_\_\_\_\_ of \_\_\_\_\_  
*(print name) (organization)*

that a check be made out to \_\_\_\_\_  
*(name of person or company to be paid)*

Social Security Number \_\_\_\_\_  
*(if check is for individual, include that person=s social security #)*

in the amount of \$ \_\_\_\_\_

Brief description of what money is for \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

The address below is where the check must be sent

\_\_\_\_\_ *(name of company or person)*

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_ *(phone #s of business or person)*

Part B

\_\_\_\_\_  
*(Organization Treasurer signature)*

\_\_\_\_\_  
*(SBA Treasurer signature)*

Please return check to:  
\_\_\_\_\_

APPROVED FOR PAYMENT
ACCT. # _____
DATE _____
SIGNATURE _____ <i>(Associate Dean for Student Affairs)</i>

