



CHECK REQUEST

Accounts Payable Department
 3201 Arch St., Suite 400
 (215) 895-2840

Please type or print legibly

1. Payee Information	Name to appear on check:				
	Address 1				
	Address 2				
	City			State	Zip
	Is the Payee or Beneficiary a U.S. Citizen or Permanent Resident Alien? Yes No				
Is the Payee employed by Drexel? Yes No Gross up this amount? Yes No					

Soc. Sec. No./Ind. Taxpayer I.D. No. (Required) For Individuals
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Fed. I.D. No. (Required) For Unincorporated Entities

2. Justification & Delivery	Reason for Expenditure				
	Invoice No.				
	Check Distribution Instructions	US MAIL	PICK UP	MAIL WITH ENCLOSURES	CAMPUS MAIL (Send to preparer below. Attach copy of form.)

3. Funding Source	Fund Code (6 digits)	Org. Code (4 digits)	Acct. Code (4 digits)	Activity Code* (4 digits)	Cost Center Title	Amount
						\$
						\$
						\$
						\$
						\$
TOTAL						\$

* Activity Code is Optional

If additional space is required, please attach a separate sheet. **DO NOT** use additional Check Request forms.

4. Approvals	P.I. / Cost Center Administrator (Additional signatures required for multiple Cost Center allocations.)		
	Print Name	Signature	Date
	Director / Dean		
	Print Name	Signature	Date
	Vice President		
	Print Name	Signature	Date

I hereby certify that all of the information provided on this form is true and correct to the best of my knowledge. If the expenditure relates to a GRANT or CONTRACT, the authorizing signature above denotes that the expenditure complies with all applicable cost principles and regulations of the sponsoring entity.

Prepared By

Date

Location

Telephone

Submit original form to Accounts Payable at the address above with required supporting documentation. To ensure prompt payment, complete the entire form and obtain necessary signatures. Allow 7-10 working days for processing.

5. For Internal Use Only	<input type="checkbox"/> 1099 <input type="checkbox"/> 1042	
	Withhold as: <input type="checkbox"/> USA Backup Withholding	
	Vendor #	A.C.
	Gross Amount	Seq. #
	Reviewer's Signature	Date