

Invoice Voucher

2022-2023 Academic Year, 9/16/22 - 6/15/23

				Off-Campus V	Vork-Study	1			
Return To:	Central Washingt Financial Aid - Wo 400 E. University Ellensburg, WA 9	ork-Study Way Bouillo		INSTRUCTIONS TO EMPLOYER: Submit only ONE student per Invoice Voucher. Submit forms MONTHLY. These forms must be completed and signed in ink, and we cannot accept electronically generated signatures. We will only reimburse if the student's CWU Time Sheet matches the hours recorded on the student's Invoice					
Employer:	J.			Voucher. Disclaimer: Any requests for reimbursement made after the fiscal year end on June 19, 2023, will not be honored for reimbursement.					
				the students lis	ted below hav	NLTY OF PERJURY und Ve been paid <u>by chec</u> Vest reimbursement j	<u>:k</u> or direct de	posit the full a	mount of net
				Authorized Signature Title of P		Title of Perso	erson Date		
ederal ID #: _		Term: oss out and ir	 nitial all change	Pay Period Starts or modifications					
CWU Studer	nt Student's Name	Total Hours	Hourly Wage	Gross Pay	FICA	Other Deductions (student share only)	Net Earnings	Check #	Date Issued
					1				
					1				
					1				
					1				
					- ↓				
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					1				
	Paid \$	ross Pay	_ X	Share %	_=	Amount to be reimb	- ursed		
FA USE ONLY	□ FWS 54	4510-2222830	0001	/S 54510-22310900	54510-2231090001 \$ Amount to be Reimburse			ed	
	Program FMS Account								
	Financial Aid Office: Date								
CHECKED & AP	PPROVED FOR PAYN	ЛЕNT BY:	I	NVOICE DATE:	INVOICE NO: VOUCHER NO:				