



CHECK REQUEST

VENDOR #		PO #			
VENDOR NAME AND ADDRESS			DEPARTMENT		Department Approval
			Central Wasington University Accounts Payable Ellensburg, WA 98926		
					Accounts Payable Approval
					Date

Line	Invoice #	Date	Amount	Voucher #	Speedtype	Account	Fund	DeptID	Program	Oper. Unit	Component	Proj/Grt
	TOTAL											

IS THE PAYEE OR THE BENEFICIARY OF THE PAYMENT A U.S. CITIZEN OR U.S. PERMANENT ALIEN? YES NO

(IF "NO", SEE THE NONRESIDENT ALIEN TAX COMPLIANCE MANUAL)

REASON FOR CHECK: _____