

## STUDENT SENATE

GL #11-00000-7001-00

Use this form to to arrange for payment to individuals or businesses when a Purchase Order or P-card is not required. Check Requests received Monday - Friday are processed for the following Wednesday

PAYEE INFORMATION				
FULL (LEGAL) NAME		SSN, EIN, EMPLOYEE OR VENDOR #		
MAILING ADDRESS *** REQUIRED ***		Attach completed IRS Form		
		W-9 for all Vendors		
		Fill-in Form is available @		
		http://wabash.edu/businessoffice/acc		
		1		
EXPENSE DETAILS				
		CLUB CODE	CLUB/ORGANIZATION NAME	AMOUNT
				\$
				\$
				\$
				\$
				\$
		T	OTAL CHECK AMOUNT	\$
SIGNATURES/APPROVALS				
REQUESTOR NAME REQUESTOR SIGNATURE		EMAIL	DATE	
CLUB TREASURER NAME	CLUB TREASURER SIGNATURE		EMAIL	DATE
STUDENT BODY TREASURER NAME	STUDENT BODY TREASURER SIGNATURE		EMAIL	DATE
	CHECK HANDLING INSTRUCTI	IONS		
MAIL (USPS)				
	ness Office Front Desk after 2:00 PM follow		ч	
	Mailbox after 2:00 p.m. the following Wedr	nesday		
DETURN THE FORM AND CURPORTING DOCUMENTATION TO		For Accounts Payable Use Only		
RETURN THIS FORM AND SUPPORTING DOCUMENTATION TO:  STUDENT BODY TREASURER			Voucher #	