

Vendor ID:

## College Council & Cultural Funds CHECK REQUEST

- **Requester**: Complete the entire form( including the name and email of the Advisor/Budget Manager) then forward the competed form and receipt(s) to the Advisor/ Budget Manager for approval.
- Advisor/Budget Manager: Review the check request and back-up documents, then email the documents and a statement of approval to as.rsobanking@sdsu.edu.

Date of Request :	
Name to Whom the Check is Payable (Payee):	
Address:	City/State/Zip:
Payee Phone (include Area Code):	Email Address:
Name of Organization/Affiliation:	
Purchase Order # (if applicable):	_ Invoice # (if applicable):
Delivery Method: Mail Pick-up: Name	

Expense Purpose (For food, entertainment, clothing, please explain who received the benefit, with a list of recipients where these expenditures occurred). If the space below is insufficient, please include a separate Word document.

A.S. ACCOUNTING USE ONLY	Account Number / Line Item Code x - xx - xxxx - xxxx	\$ Amount
Expense Description:		_
Requester's Name (please print):		
Requester's E-mail Address:	Requester's Phone	
Advisor/Budget Manager's Name (please print	):	
Advisor/Budget Manager's E-mail Address:		
Advisor/Budget Manager's Signature (required for	or in person submission):	