Check No. _______________

CHECK REQUEST

MORRIS COLLEGE
SUMTER, SOUTH CAROLINA 29150

DATE: _________________

VENDOR ID#: _________________

AMOUNT$: ______________________

MAKE CHECK PAYABLE TO: ____

PURPOSE: ____

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ACCOUNT TO BE CHARGED: ____

SIGNATURE OF REQUESTER: ___________________________________

SIGNATURE OF SUPERVISOR: __________________________________

DETAILS: ____

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APPROVED BY: ______________________________ Date: ______________________
(President)

APPROVED BY: ______________________________ Date: ______________________
(Director of Financial Services)