Check Request  
(Multi-part form)  

Forms available: Research and Sponsored Programs Office – 25 Main Room 103  
Foundation Administration – 25 Main Room 203  

Check Request  
(Project # 30000-99999)  

Check Request #:  

- Research & Sponsored Programs (RSP) Zip 870  
- Foundation Administration (Admin) Zip 246  

Place a check mark next to the appropriate Foundation Office  

Check the appropriate box for delivery type. Enter a telephone extension if necessary.  

Check the Mail Attachment box if something is to be mailed with the check. Please provide a copy of attachment  

Enter individual or vendor name  

If payment is to vendor, list each invoice amount separately  

Enter complete address  

Enter the amount to be charged to each project/object code  

Enter column total  

Enter the project and object codes  

Enter a detailed description of the nature of the expenses  

Do not write in shaded areas  

For hospitality, food, beverages and entertainment reimbursement enter date, time, location, purpose and attendees (if less than ten provide a list of names)  

Check Request (Multi-part form)  

Enter zip so that the green copy of the check request can be returned, phone number and name of person to contact if there are questions regarding paperwork  

Complete request form, attach required backup documents and submit to the appropriate Foundation Office  

Research and Sponsored Programs, 25 Main Room 103 (Zip 870) or  
Foundation Administration, 25 Main Room 203 (Zip 246)