

# FINLANDIA

## UNIVERSITY

### CHECK REQUEST FORM

PAYABLE TO: \_\_\_\_\_ AMOUNT: \$ \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_ DATE: \_\_\_\_\_  
\_\_\_\_\_

MAIL TO: Same as Above \_\_\_\_\_

DEPARTMENT: \_\_\_\_\_ ACCOUNT: \_\_\_\_\_

REQUIRED BY: \_\_\_\_\_

APPROVED BY: \_\_\_\_\_

REQUESTED BY: \_\_\_\_\_

REASON FOR REQUEST: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

#### ACCOUNTING OFFICE USE ONLY

APPROVAL:	ACCOUNT #:	AMOUNT:
	****See Above****	