



Safekeeping Check Request

Instructions

This form is used to request a check from a safekeeping account. Complete the request details section of the form and return to Accounts Receivable in Jardine Hall room 201, by mail to campus box 38, or by email to wsuaccountsreceivable@wichita.edu. Attach documents that support the request, such as an invoice or receipt. Failure to include supporting documents will delay processing. Requests turned in incomplete will not be processed.

Request Details

Request Date _____

Payee/Vendor Name _____

myWSU ID _____

WSU ID is required. A completed W-9 or W-8 BEN form will be required for all new WSU IDs.

Street Address _____

City, State, Zip Code _____

Description of Charges _____

Amount of Expense _____

Circle One:

Send to Payee or Send to Safekeeping Group campus box number _____

Banner Fund and Organization numbers to be charged _____

Safekeeping Group Name _____

Student Representative's Name(print) _____

Student Representative's Signature _____

Student Advisor's Name (print) _____

Student Advisor's Signature _____

Form completed by (print name and phone number) _____

Accounts Receivable Office Use Only

Account Balance on FGIBAVL _____

AR Initial AR Initials Date: _____

Circle One:

Applied to TSAAREV or Turned in to Accounts Payable

Accounts Payable Office Use Only

EXPAGY

EXPSVC

Reportable Expense 1099

AP Approved By _____

Check Number _____

Issue Date _____

Processing Details Completed by AR

Amount was increased to include sales tax

Payee will be sent a 1099

Department received funds electronically

Payee received funds via direct deposit

Check is enclosed

Check is mailed

Applied to payee's account