



## 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](mailto: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