Clear Form

Lakehead UNIVERSITY | Financial Services

LAKEHEAD UNIVERSITY CHEQUE REQUISITION

RETURN TO ACCOUNTS PAYABLE WITH SUPPORTING DOCUMENTATION

DATE: DEPARTMENT: PHONE EXT:

CHEQUE AMOUNT:

CURRENCY: ◯ CAD ◯ USD

PAY TO:

BUDGET CODE(S):

HOW SHOULD THE CHEQUE BE PROCESSED?

◯ MAIL DIRECT

◯ ELECTRONIC PAYMENT

◯ INTEROFFICE

◯ PICKUP AT ACCOUNTS

FOR PICKUP, CALL EXT #

REASON FOR PAYMENT (include important dates)

AUTHORIZED SIGNATURE:

PRINT NAME:

AUTHORIZED SIGNATURE:

PRINT NAME:

AUTHORIZED SIGNATURE:

PRINT NAME:

PLEASE PROVIDE S.I.N. AND DATE OF BIRTH IF THIS IS FIRST REIMBURSEMENT FROM LAKEHEAD UNIVERSITY

DATE OF BIRTH: SOCIAL INSURANCE NUMBER:

ACCOUNTING USE ONLY				
GL ACCOUNT #	NET AMOUNT	INVOICE #	INV. DATE Y/M/D	INVOICE REF.#
VENDOR ID #:			VOUCHER #:	
CHEQUE #:	DATE:	AUTHORIZED APPROVAL:		

INSTRUCTIONS

Please use form fields or print clearly. The cheque requisition form must:

- have all fields in the top portion properly completed
- include a full, seventeen-digit budget code (ex. XX-XX-XXXXXXXX-XXXXX)
- have proper authorization for the budget code(s) and the signing authority limits per the Approval Authority Policy
- have authorization of their supervisor for requisitions payable to oneself
- attach the original receipts showing the details of the purchase