LAKEHEAD UNIVERSITY CHEQUE REQUISITION RETURN TO ACCOUNTS PAYABLE WITH SUPPORTING DOCUMENTS							
DATE:			□М	☐ MAIL DIRECT ☐ ELECTRONIC PAYMENT			
SUBMITTING DEPT:				□ INTER-OFFICE			
PHONE EXT:							
CHEQUE AMOUNT: \$				☐ PICKUP AT ACCOUNTS			
□ CDN □ U.S.	□ U.S.			☐ CALL EXT#FOR PICKUP			
PAY TO:							
			REAS	REASON FOR PAYMENT:			
			(include	(include important dates)			
BUDGET CODE:							
AUTHORIZED SIGNATURE:							
PRINT NAME:							
BUDGET CODE:							
AUTHORIZED SIGNATURE:							
PRINT NAME:							
PLEASE PROVIDE S.I.N.# AND DATE OF BIRTH IF THIS IS FIRST REIMBURSMENT FROM LAKEHEAD UNIVERSITY				DATE OF BIRTH:			
				SOCIAL INSURANCE NUMBER:			
ACCOUNTING USE ONLY							
GL ACCOUNT #	NET AN	MOUNT	INVC	DICE #	INV. DATE Y/M/D	INVOICE REF.#	
VENDOR ID #:				VOUCHER #:			
CHEQUE #: D		DATE:		AUTHORIZED APPROVAL:			

INSTRUCTIONS:

Please print clearly. The cheque requisition form must contain the following:

- All fields in the top portion must be properly completed.
- Must include the budget code.
- Must have proper authorization for the budget code and the signing authority limits as set out in the LU policy on signing authority.
- All cheque requisitions payable to oneself must have authorization from your supervisor.
- The original receipts showing the details of the purchase must be attached.