



CALIFORNIA STATE UNIVERSITY, FULLERTON™

AGENCY CHECK REQUEST WORKSHEET

Name of Organization _____

Agency Account # _____

Payee _____ CWID (if applicable) _____

Payee Address _____

Phone _____ E-mail (CSUF if student) _____

Distribution: Mail Hold for Pickup [Checks not picked up within three (3) business days will be mailed]

Table with 3 columns: Receipt/Invoice #, Description (to be listed under Memo in Sage), Amount. Includes a Total row at the bottom right.

This completed form needs to be included with the attachments (receipts/invoices) submitted for each request. All applicable lines are to be completed.

For reimbursements:

- Use "Reimb [Current Date] as the Vendor Document Number.
All receipts are to be attached to the request, and each receipt listed on a separate line.
The memo is the detailed description of what was purchased.
If the reimbursements are for an event, include the event name and date.
Complete sales receipts need to be included (receipts show itemized list of items and costs, subtotal, shipping, sales tax, total and amount paid).
If the payee is the parent of a CSUF student, please use that student's CWID.
Please be aware that we are unable to reimburse for purchases made with a gift certificate or SNAP/EBT benefits.

To pay vendors:

- Attach the invoice with the invoice number used as the Vendor Document Number.
If the vendor is new, please attach their completed W-9 with the invoice.
If the vendor is performing a service on campus, include their current Certificate of Insurance.

Requestor Name _____ CWID _____

Phone _____ CSUF E-mail _____