

Vendor/Student/ Employee ID #:

Payee's Full

Street Address:

City, Province:

Postal Code:

Currency Type: CDN US

DOB (if new Payee):

DD-MMM-YYYY

## **CHEQUE REQUISITION**

**AUTHORIZATION** (see over) Claimant Signature Legal Name: **Print Claimant Name** Signature Approval (if required) Print Approval Name By signing, I acknowledge that any errors or incomplete forms will be returned to me and/or my department to correct and resubmit. Date:

Direct Deposit Other

DESCRIPTION	FUND	ORGN	ACCT	PROG	ACTV	LOCN	Amount before tax	TAXES	TOTAL AMOUNT

## Cheque requisitions will be processed with (ORIGINAL) invoices only. NOTE: 1.

Photocopies of any attachments (i.e. subscription renewal form, membership dues form, correspondence) 2. must be **STAPLED** to the requisition for backup.

DD-MM-YY

- Any documentation that should accompany the cheque must be clearly identified and copy attached 3. to the requisition by **PAPER CLIP**.
- 4. Incomplete forms and/or errors may result in delays in processing time.
- If RUSH payment is being requested, please see Finance Manager for approval. 5.

MAIL

Please allow up to THREE (3) weeks for processing. 6.

## \*\*REQUISITIONS WITHOUT PROPER APPROVAL OR ATTACHMENTS WILL BE RETURNED TO THE REQUISITIONER\*\*

## THE UNIVERSITY OF NORTHERN BRITISH COLUMBIA

Form Name: CHEQUE REQUISITION

Purpose: To request a cheque through Accounts Payable. Items submitted are limited to those expenditures not subject to regular

purchasing policies and procedures. Please see the Purchasing web site at http://www.unbc.ca/purchasing/ for more

information. This form is NOT to be used for payroll, professional development, or travel claims.

FIELD: DESCRIPTION:

Vendor/Student

Employee ID #: Enter the Student or Employee ID # of the payee. Leave blank if it is a Vendor and you do not know there Vendor #.

Payee: The name of the individual or company that the cheque should be made payable to. Full Legal Name is needed

Address: The address of the payee: where the cheque should be mailed to.

DOB: Date of Birth: This is so we can ensure the cheque is attached to the correct person in the system and needed to set up new

payee

Description: WHO, WHAT, WHERE, WHEN and WHY

The description should detail the expenditure being made. In the case of event related expenses the description should include the name of the event (conference/seminar) and dates. Requests for reimbursement for meeting expenses (meals, etc.) must include the names of all attendees. Please refer to the policy on "entertainment expenses" at <a href="https://www.unbc.ca/policy/finance.html">www.unbc.ca/policy/finance.html</a>

for more information.

Amount: The total amount the cheque should be prepared for (including all taxes).

Signature/

Authorization: Requires the signature of the individual requesting the cheque. This individual must have signing authority for the FUND and

ORGN, which is being charged.

If the budget holder is also the payee, the requisition must also have one-up signing authority.

By signing this form you are agreeing to the following:

- All expenditures on the claim are for the purpose for which the grant was awarded;
- The charges included have not been claimed for reimbursement from other sources; and
- Reimbursement for expenditures received from other sources or institutions must be disclosed to the administrating
  institution.