



# CHECK REQUEST FORM

Campus Reference # \_\_\_\_\_

10 digit alpha/numeric

USE THIS FORM FOR NON-EMPLOYEE PAYMENTS FOR CATEGORIES SPECIFICALLY LISTED ON THIS FORM.

**Do not use this form for invoice payments against BuzzMart PO's. Only one vendor invoice per check request.**

<b>PURPOSE</b>	<b>BUSINESS PURPOSE/DESCRIPTION:</b>		(FOR AP USE ONLY)
			VOUCHER#: _____
<b>PAYMENT CATEGORIES</b>	<input type="checkbox"/> AGENCY FUND PAYMENT Use account <b>791000</b> (except rent payments and services - use actual expense account number)		
	<input type="checkbox"/> CATERING / GROUP MEALS (Attach Food/Group Meal Event Documentation Form and original receipt or invoice) Account <b>751106</b>		
	<input type="checkbox"/> HONORARIUM / PROF. ED / OPTIONS INSTR / STUDENT CTR / FERST CTR PERFORMER (Attach contract, invitation or event publication) Reimbursable Expenses Associated With These Payments Can be Processed Using this Form.		
	<input type="checkbox"/> HUMAN SUBJECTS/ RESEARCH PARTICIPANT PAYMENTS Account <b>751510</b>		
	<input type="checkbox"/> INTER-AGENCY TRANSFER / AFFILIATED ORG. / SPONSORSHIP / DEPT OF HOMELAND SECURITY / LEGAL		
	<input type="checkbox"/> NON-GT STUDENT TRAINING STIPENDS, NON-EMPLOYEE AWARDS (Sponsored Funds Only) <a href="#">Link to Trainee Payment Policy Grid</a>		
	<input type="checkbox"/> PRE-PAID EXPENSE for future fiscal year activity, using State funds.		
	<input type="checkbox"/> PRE-PAYMENT: POSTAGE / SUBSCRIPTION / INSTITUTIONAL MEMBERSHIP / DEPOSITS/ CERTIFICATIONS		
	<input type="checkbox"/> REFUND: NON-EMPLOYEE (Key Deposit, Course Deposit, BUZZ Card) Use original account used for deposit.		
	<input type="checkbox"/> REGISTRATION (Conference, Workshop) and ALL-INCLUSIVE MEETING PACKAGES. Account <b>727100</b>		
	<input type="checkbox"/> REIMBURSEMENT for non-travel related Institute purchases made from personal funds (original receipts must be attached) Account <b>727130</b> All travel for non-employees reimbursed via the TES Form. All employee reimbursements are via the T&E System.		
	<input type="checkbox"/> RENT (Hotel rooms for Visitors or Events, Student/Visitor Transportation, Storage Space, Equipment)		
<input type="checkbox"/> UTILITY / SHIPPING / TELECOM SERVICES PAID TO SERVICE PROVIDER			
<b>NRA</b>	<b>FOREIGN NATIONAL/ ENTITY</b> <input type="checkbox"/> FELLOWSHIP <input type="checkbox"/> HONORARIUM / SERVICE <input type="checkbox"/> SERVICE OUTSIDE OF U.S. (Account <b>751650</b> )		
<b>PAYEE INFO</b>	Payee Name (Last, First Name for individuals): _____ Address: _____ Phone: _____ City: _____ State: _____ Zip: _____ Country: _____ VENDOR ID: _____ <b>NEW US VENDORS REQUIRE SUBMISSION OF VENDOR PROFILE FORM, INTERNATIONAL VENDORS MUST SUBMIT A W-8 FORM.</b>		
	Project #: _____ Account Code: _____ Amount: \$ _____ Project #: _____ Account Code: _____ Amount: \$ _____ <a href="#">Link to Chart of Accounts</a> Total: \$ _____		
<b>MAIL</b>	<b>NOTE: ALL PAYMENTS ARE SENT VIA U.S. MAIL OR ACH, UNLESS VALID BUSINESS EXCEPTION IS APPROVED.</b> <input type="checkbox"/> CAMPUS MAIL    MAIL CODE: _____ <input type="checkbox"/> CALL FOR PICK-UP    PHONE #: _____		
<b>DEPT/UNIT APPROVAL</b>	<b>"I certify that I have reviewed this payment and find it compliant with Georgia Tech procurement policies &amp; procedures. This payment is an appropriate expense to the fund source(s) identified and I hereby authorize payment."</b> Authorized Approval Signature: _____ Date: _____ Printed Name of Approver: _____ Title: _____ Supplemental Approval ( \$3000 +): _____ Title: _____ Printed Name of Department Contact: _____ Phone: _____		

**Route form to Accounts Payable, Mail Code 0253 or Hand Deliver to 711 Marietta Street- Business Services**