



WAYNE STATE UNIVERSITY

# C2 Pipeline Program Check Request/Payable Request Form

2023/24 Program Year

Requester Name  Phone

Date  Amount:  Purchase Order

Check Request    Date Needed if Check Request     Pro-Card Purchase    Pre-Pay Check (state reason below)    In Direct (146013)

Staff Reimbursement     IRB     Wayne Buy Purchase    Travel Wayne    General Acct (221844)

Name

Address/ Web Site:

City  State  Zip

Attention

Reference/Order/Confirmation/Invoice #

Amount  Account  Site/Program  Multiple

Place Holder

Amount  Account  Site/Program  Multiple

Place holder

I Index #370926 (L-1) Amount  Account  Site/Program  Multiple  
University, MI Collegiate, Kettering, Fitzgerald, Southfield A&T

Index #370927 (L-2) Amount  Account  Site/Program  Multiple  
Center Line, South Lake, Clintondale, Frontier International, Warren Woods Tower

Index #370928 (L-3) Amount  Account  Site/Program  Multiple  
Denby, King, Pershing, Cody, EEVA

Detailed Description Including Splits and Amounts

Person Submitting  Date

Supervisor Signature  Date  Approved    Denied

PI/Project Director  Date  Approved    Denied

Comments

Supporting Documentation such as Invoices, Expense Reports, Lesson Plans, or Contracts must be attached to this request. If shipment is already received, then packing slip must be attached. Be sure to sign invoice pages. If this is for a contract, then ensure that the contractor (if applicable) has a W-9 on file.