

**FOOTHILL DE ANZA COMMUNITY COLLEGE DISTRICT**

**REQUEST FOR CHECK**

(DO NOT USE FOR MILEAGE, TRAVEL, PROFESSIONAL SERVICES)

CHECK  
REQUEST NO.

**CAS0001**

MAKE CHECK PAYABLE TO:

DATE OF REQ.: \_\_\_\_\_

CHECK REQUIRED: \_\_\_\_\_

MAIL TO:

VENDOR NUMBER:

TOTAL CHECK AMOUNT: \_\_\_\_\_

PAYMENT FOR: (PROVIDE COMPLETE EXPLANATION)


REQUESTED BY: \_\_\_\_\_

APPROVED BY: \_\_\_\_\_

ACCOUNT CODE	OBJ CODE

AMOUNT
\$0.00

**TOTAL**