

## BEVILL STATE COMMUNITY COLLEGE CHECK REQUEST FORM

<b>Please allow up to 7 days for completion</b>	Vendor A-Number:		
Vendor Name and Address:			
City:	State:	Zip Code:	
Amount of Check:	Explanation to be typed on the check		
Mail to Vendor Inter-campus Mail to Requester Direct Deposit (Employees Only)		Requester will pick up at Business Office Fayette                      Pickens County Hamilton                      Sumiton Jasper	
Remarks/Explanation for Check Request:			
Requested By:	Date:	Authorized By:	Date:
Printed Name		Printed Name	
Club/Organization/Funding Source:			
Fund-Organization-Account-Program		Debit	Credit