

The City College of the City University of New York

Non Tax Levy Entity Disbursement Requisition Form

Document No. _____

Date _____

Name of Account: _____

Requesting Dept. _____

Building/Office # _____

Prepared By: _____ Ext/Phone _____

Disbursement Requested From:

- 21st Century Fdn
- AEC
- CC Bursar Special
- Trusts & Gifts
- Other _____

Type of Payee _____

Check Payable To _____


Address _____

City, State Zip _____

- Mail Check to Payee
- Dept. pick up Ext # _____
- Bursar-Scholarships
- Other _____

Expenditure Account Number (Gray area for Financial Accounting only)

| Fund | GL | Department | Project | Source | JPC |
|------|----|------------|---------|--------|-----|
| | | | | | |

| Disbursement Purpose | Amount |
|------------------------------------------------------------------------------------|--------|
|  | |
| | |
| | |
| | |

Please explain if the Total is different from the Pay Amount.

Total: _____

Pay This Amount: _____

Original invoices, receipts and any supporting documents must be submitted with this requisition to: **Financial Accounting Office, WG112**

The undersigned certifies that the above expenditures are necessary and proper and are made within the budgetary limitations of the above fund.

Requestor Signature _____ Date _____

Authorized Signature _____ Date _____

Requestor Name and Title _____

Authorized Name and Title(signature card on file) _____

Financial Accounting Office Only

| | | |
|---------------|--|-------------------------------------------|
| Vendor Number | | Approved By _____ Financial Accounting |
| Examined By | | |
| Date Entered | | |
| Amount | | |
| Check Number | | |
| Check Date | | |
| Mailed Date | | |

Date Approved _____