STUDE		SSIP	AYMENT	VOUCHER		
SERVI		DRGANIZATION #		_	OFFICE USE	ONLY
WEST CHESTER	I INIVERSITY ORGA	NIZATION NAME:			DATE:	
PLEASE SE	(1	to be charged)				
	UP CHECK	Venmo Us	/able to OR ername:			
	AIL CHECK					
	ENMO			•		
	TRANSFER	<b>→</b>	0#	Organizatio	n Nome	
		L	Org. #	Organization	i Name	
STUDENT TREA	SURER SIGNATURE	Phone #		FACULTY ADVISOR SIGNAT	TURE	Phone #
STUDENT NAME	& E-MAIL ADDRES	S	•	FACULTY NAME & E-MAIL A	DDRESS	
INVOICE No.		DES	CRIPTION OF	EXPENSE		TOTAL AMOUNT
(if applicable)						AWOUNT
	IS THIS FOR RAM BUC	KS? □				
	IS THIS AN ADVANCE?					
	Date Check Req'd (mir	n. 3 business days)	):		Total:	
	opriate documentation		, receipt, etc)			
ADVANCE receipt	s must be returned with	nin 5 days				<u></u>
				APPROVED - DIF	RECTOR OF S.S.	I
STUDE	NT	SSI F	PAYMENT	VOUCHER	-	
SERVIC	CES,	ORGANIZATION #			OFFICE US	EONLY
INC.	0	NIZATION NAME:		_	DATE:	
WEST CHESTER	In the parties	to be charged)			DATE.	
<u>PLEASE SE</u>	<u>LECT 1:</u>	Check Pay	able to OR			
WILL PICK UP CHECK Venmo Username:						
N	AIL CHECK					
	ENMO	ī		1		
	TRANSFER	$\longrightarrow$	0#	Ownerinsti	an Mana	
			Org. #	Organizatio	on Name	
STUDENT TREA	SURER SIGNATURE	Phone #	ı	FACULTY ADVISOR SIGNA	TURF	Phone #
0.000				.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
STUDENT NAME	& E-MAIL ADDRES	S	ı	FACULTY NAME & E-MAIL A	DDRESS	
INVOICE No.		Г	DESCRIPTION (	OF EXPENSE		TOTAL
(if applicable)		<u>-</u>				AMOUNT
	IS THIS FOR RAM BUC		D 0 1 "			
	IS THIS AN ADVANCE?  Date Check Reg'd (min		Ram Card #:		Total	
					Total:	
ase attach appropria	te documentation (invo	ice, contract, itemize	ed receipt, etc)			

Ple ADVANCE receipts must be turned in within 5 days