



REQUEST FOR RUSH CHECK

Please print legibly

Date: _____ Date check is needed: _____

Payee: _____

Department: _____

Reason for rush check: _____

Payments Department Check:	Payroll Check:
Amount	Employee Signature
Department Rep Signature	Supervisor Signature
When check is ready.... <input type="checkbox"/> Mail <input type="checkbox"/> Pick Up Phone Dept. x _____	Vice President Signature

PLEASE HAND DELIVER REQUEST DIRECTLY TO WETER HALL, 3RD FLOOR. CHECK WILL BE READY FOR PICKUP WITHIN 24 HOURS.

Controller Signature: _____