


**Fresno City College**  
**REQUEST FOR PAYMENT**

\_\_\_\_\_  
 Activity/Club/Organization

Date: \_\_\_\_\_  
 (This form to be received by CBO at least 10 days prior to due date)

Budget Number \_\_\_\_\_

Make Check Payable To \_\_\_\_\_

Date Due \_\_\_\_\_

Amount of Check \_\_\_\_\_

Reason for Payment

Requested by \_\_\_\_\_

Program Administrator \_\_\_\_\_

Authorized Student (if applicable) \_\_\_\_\_

College Business Manager/Accounting Supervisor \_\_\_\_\_

This check is to be: PICKED UP OR

MAILED Date \_\_\_\_\_

Received by \_\_\_\_\_

Street Address \_\_\_\_\_

Date \_\_\_\_\_

City State Zip

Accounting Department \_\_\_\_\_

Date Approved \_\_\_\_\_

TRAVEL BREAK DOWN

# of Faculty/Staff \_\_\_\_\_

# BFT \_\_\_\_ X \$ \_\_\_\_\_ = \_\_\_\_\_

# LNC \_\_\_\_ X \$ \_\_\_\_\_ = \_\_\_\_\_

# DNR \_\_\_\_ X \$ \_\_\_\_\_ = \_\_\_\_\_

Faculty/Staff  
SUBTOTAL \_\_\_\_\_

\$

# of Students \_\_\_\_\_

# BFT \_\_\_\_ X \$ \_\_\_\_\_ = \_\_\_\_\_

# LNC \_\_\_\_ X \$ \_\_\_\_\_ = \_\_\_\_\_

# DNR \_\_\_\_ X \$ \_\_\_\_\_ = \_\_\_\_\_

Students  
SUBTOTAL \_\_\_\_\_

GRAND TOTAL \$ \_\_\_\_\_

For Business Office Use Only

VOUCHER # \_\_\_\_\_

VENDOR # \_\_\_\_\_

CHECK NUMBER \_\_\_\_\_

CHECK DATE \_\_\_\_\_

VOID DATE \_\_\_\_\_

REISSUE CK # \_\_\_\_\_

REISSUE DATE \_\_\_\_\_