

**Accounts Payable Check Request Form**  
**The Polytechnic Foundation of KSU, Inc.**  
(Formerly Southern Polytechnic State University Foundation, Inc.)  
3391 Town Point Drive, NW TP-4420, MD 9101, Kennesaw, GA 30144  
Bruce McElfresh, – 470-578-3334, [bmcelfre@kennesaw.edu](mailto:bmcelfre@kennesaw.edu)  
Email questions or concerns to: [polytechnicfoundation@kennesaw.edu](mailto:polytechnicfoundation@kennesaw.edu)

**Original "receipts" must be attached. Copies of invoices are acceptable.**

Today's Date: \_\_\_ / \_\_\_ /2016      Name of person to contact if questions: \_\_\_\_\_

E-mail address: \_\_\_\_\_ Telephone: \_\_\_\_\_

**Check Payable To:** \_\_\_\_\_

**Vendor Tax ID Number:** \_\_\_\_\_

**Full Address to mail reimbursement check (HOME OR P.O. BOX)** \_\_\_\_\_

**Check Amount Due:** \$ \_\_\_\_\_

Foundation Account Codes to charge expenses to:

**Department Name:** \_\_\_\_\_

**Activity Name or Number (3 digit):** \_\_\_\_\_

**General Ledger Number (4 digit):** \_\_\_\_\_

**General Ledger Number (4 digit):** \_\_\_\_\_

Approved By the following:

Chair of Department/Program: \_\_\_\_\_, \_\_\_\_\_  
*Signature* *Date*

**\*\*\*AND\*\*\*\***

Dean of College: \_\_\_\_\_, \_\_\_\_\_  
*Signature* *Date*

**\*\*\*OR\*\*\*\***

Special Assistant to the President: \_\_\_\_\_, \_\_\_\_\_  
*Signature* *Dr. Ron Koger*

*\*Approved by Executive Director of PFKSU: \_\_\_\_\_  
Michael Harders ~ Signature*

*\*Approved by Executive or Finance Board Member: \_\_\_\_\_  
Chair, Vice Chair or Treasurer Signature*

**\*Explanation of Charges and Expenses:** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**\*Invoice Number (one invoice per form):** \_\_\_\_\_

**\*Account Number:** \_\_\_\_\_