



UNIVERSITY OF WINDSOR
STUDENTS' ALLIANCE

University of Windsor Students' Alliance
Room 209 CAWSC, 401 Sunset Avenue
Windsor ON, N9B 3P4

**UWSA CHEQUE
REQUISITION FORM**

Cheque Req #

Date Submitted:

Date Required:

Department/Club/Society:

Submitted By:

Email Address:

PAYABLE TO:

Description of the Payment (Mandatory)**

Charge Account Number:

\$

Charge Account Number:

\$

Charge Account Number:

\$

Charge Account Number:

\$

Charge Account Number:

\$

HST

\$

Amount of Cheque:

\$

Back up Attached:

YES: NO:

Please attache original receipts

Approved By:

(UWSA Eligible Signatories: President, VP Finance, GM, Finance Manager)

Signature:

Finance Department Comments:

CLUB AND SOCIETY SECTION

Club/Society Name

Club/Society Account Number:

Authorized
Signatory 1

Name

Signature

Authorized
Signatory 2