



Student Government Association Check Request

Date: _____

Check Payable To: _____ SS# or Datatel#: _____

Address: _____

Mail Check To: _____ Give Check To: _____

Organization to Charge: _____

Account Title: _____ Account #: _____ Amount: _____

Account Title: _____ Account #: _____ Amount: _____

Account Title: _____ Account #: _____ Amount: _____

Total: _____

Explanation: _____

Contact Person: _____ Phone: _____

Organization Treasurer Signature: _____

Organization Advisor Signature: _____

Date Check Needed: _____

For all Check Requests:

Treasurer and Advisor Signatures are required.

Check Requests made out to Students, Faculty and Staff: Social Security or Datatel/Elon ID # is required

Check Requests made out to other parties, including individuals or companies: Address is required

Please return Completed Check Requests to the SGA Executive Treasurer, Moseley 221A.