

MCKENDREE UNIVERSITY
Lebanon, IL 62254

Cash Advance:

CHECKS PAYABLE TO:
Address Must Be Completed
To Process Check

Date _____

Date & Time Needed _____

Cks Written Mon/Wed/Fri _____

Hold For Pickup _____

Mail _____

Business Office Approval _____

Vendor Number _____

ACCOUNT NUMBER	ACCOUNT DESCRIPTION / REASON FOR REQUEST	AMOUNT
GRAND TOTAL		\$0.00

Signature _____