

**PAY TO:**

Please provide the payee's full name and address, in addition to a Social Security number.



LAWRENCE  
UNIVERSITY

**Disbursement Request**

Please deliver this form to:  
BUSINESS OFFICE - ACCOUNTS  
PAYABLE, Brokaw Hall,

Date:

LU Department:

Approved by: \_\_\_\_\_  
*Signature of department head or authorized person*

CHARGE TO ACCOUNT NO.	DESCRIPTION OF MATERIALS OR SERVICES not requiring a purchase order. Include quantity, unit price, date of delivery, invoice number, etc. <b>NOTE:</b> Documentation must accompany this request.	AMOUNT
Disbursement will be made by <input type="checkbox"/> Check mailed to payee <input type="checkbox"/> Check received in person at the Business Office <input type="checkbox"/> Cash received in person at the Business Office <input type="checkbox"/> Campus mail delivery to		TOTAL AMOUNT TO BE PAID...

**INSTRUCTIONS: Print this form and fill it out, or fill it out online by tabbing to fields and typing the requested information; print the completed document. (The form will be reset when you exit the document.) Ask for approver's signature.**

**Mail the form and documentation (receipts, etc.) to the Accounts Payable Office in Brokaw Hall.**

*Have questions? Call the accounts payable assistant at 920-832-6542.*