

**University of Georgia
Student Housing
REQUEST FOR PAYMENT**

Request for Payment No. _____ Today's Date _____
(optional)

Issue Check Payable To _____

Address _____ Amount to Pay \$ _____

UGA 810 Number (For reimbursements) _____

Date of Program _____ **Items Purchased** _____

Account (Acct Name & No.) _____

Budget Category _____

Approval Signatures _____

Check Request Direct Charge
From UGA Dept
P-Card HC Transfer

Cardholder _____