

**CASH PAYMENT REQUISITION
PARIS JUNIOR COLLEGE**

Special Instructions:

PLEASE PAY _____ CK. NUMBER _____
MAILING ADDRESS _____ ACCT. # _____
_____ AMOUNT _____
_____ DATE OF CHECK _____
_____ VENDOR NUMBER _____
_____ REQ. # n _____
_____ DATE _____

DESCRIPTION	AMOUNT

REQUESTED BY :

APPROVED FOR PAYMENT: