

# Wheeling Jesuit University

## Check Voucher

**DATE:**

**Mail On:**

**Pay to:**

**Federal I.D. #**

**Social Security #**

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**Description (please detail)**

**Detail Account No. (If more than one cost  
Center or classification)**

**Amount**

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**NAME OF ACCOUNT:**

**ACCOUNT NUMBER:**

**AUTHORIZED BY:**  
**(Budget Administrator/Moderator)**

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**AUTHORIZED BY:**  
**(Budget Administrator/Moderator)**

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