



# WKU FOUNDATION

Your Gifts. WKU's Future.

**WKU/Chief Financial Officer**

## SPLIT PAYMENT PRE-APPROVAL

This form is to be used when requesting WKU Foundation Funds and Western Kentucky University Funds for purchases.

**Vendor Information:**

**WKUF Acct #:**

**Amount:**

**WKU Foundation use only**

*Please attach copies of all purchase request & quotes. Please obtain the appropriate signatures for processing.*

\_\_\_\_\_ \$ \_\_\_\_\_

\_\_\_\_\_ \$ \_\_\_\_\_

Vendor Name: \_\_\_\_\_

\_\_\_\_\_ \$ \_\_\_\_\_

Brief Description:

**TOTAL** \$ \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Approved**

**Declined**

Date: \_\_\_\_\_

*Send for approval to WKU Foundation Office, Craig Alumni Center 200*

WKU Foundation Signature: \_\_\_\_\_

Account Administrator Signature: \_\_\_\_\_

**BANNER ACCOUNT INFORMATION**

Please include Banner Index that the charge was processed against and relate account code for the purchases. **(\*) are required to be filled in by Department.**

**(\*)** Banner Index #: \_\_\_\_\_ **(\*)** Commodity Code #: \_\_\_\_\_

**or**

Accounting Code #: \_\_\_\_\_  
(For Purchase)

**(\*)** Responsible Person Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**FOR UNIVERSITY ACCOUNTING USE ONLY**

Accounting Signature: \_\_\_\_\_

Date: \_\_\_\_\_