ID@							
Name					Tax ID/SS#		
Address					Requester		
City		State	Zip Code		Department	College	of Vet Medicine
Country					_ ☐ Campus Extens	sion	5557
All fields require	d. Incomplete fo	orms will be retur	ned to requester resulti	ng in	Payment Date	6/18/20	20
payment delay. **Only under sp	ecial circumstar	nces will checks t **Dep	pe allowed to be picked partment check is to be	up by individuals returned.	Payment Type	Electror	nic
FUND	ORG	ACCT	PROG	ACTV (optional)	DESCRIPTIO	N	Amount
1					/M Summer Scholars Re ogram - Stipend Installm		\$0.00 \$750 OC
					ogram - Stipend Installm		
			Date:		ogram - Stipend Installm	ent 2 of 4	\$750 OC
			Date:	6/17/20	ogram - Stipend Installm	Subtotal:	\$750 00
			Date:	6/17/20	ogram - Stipend Installm	Subtotal:	\$750 Or \$750 Or \$0.00
equester 2 or	Supervisor	Name	Date:	6/17/20	ogram - Stipend Installm	Subtotal: Sales Tax Shipping	\$750 Of \$750 Of \$0.00 \$0.00
equester 2 or	Supervisor		Date:	6/17/20	ogram - Stipend Installm	Subtotal: Sales Tax Shipping	\$750 Of \$750 Of \$0.00 \$0.00

	Payee an emp	. П	s No V	vork Study Stu	dent? Yes	No	
ID@			_				
Name					Tax ID/SS#		
Address					Requester		
_ City		State	Zip Code		Department	College	of Vet Medic
Country					Campus Extens	ion	5557
All fields requi	red. Incomplete fo	mns will be returned	to requester resulting	ng in	Payment Date	6/18/202	20
payment delay **Only under s	; pecial circumstan		allowed to be picked of the state of the sta		Payment Type	Electroni	ic
FUND	ORG	ACCT	PROG	ACTV (optional)	DESCRIPTIO	N	Amount
equeste Na	ame				\$	Subtotal:	\$16
De la	Jane -	-	Date:	6/17/20	_		Ψιο
	4	_			\$	Sales Tax	
equ ester Sig	gnature	_				Sales Tax Shipping	\$0.0
					\$		\$0.0 \$0.0
Dominique		Name			\$	Shipping	\$0.4 \$0.4
Dominique equester 2 d	e Griffon			6/17/20	\$	Shipping	\$0.4 \$0.4
equester 2 d	e Griffon or Supervisor N		 Date:	6/17/20		Shipping	\$0.0 \$0.0

ID@							
Name					Tax ID/SS#		
Address					Requester	Trin	idad Cisneros
City		State	Zip Code		Department	College	of Vet Medicine
Country					Campus Extens	sion	5557
	ed. Incomplete fo	orms will be return	ned to requester resulting	ng in	Payment Date	6/18/20	20
payment delay. **Only under sp	ecial circumstan		pe allowed to be picked partment check is to be		Payment Type	Electro	nic
FUND	ORG	ACCT	PROG	ACTV (optional)	DESCRIPTIO	DN .	Amount
-				Pro			\$750.00
						Subtotal:	\$750.00 \$750
equester Nar	ne			6/17/20		Subtotal: Sales Tax	
equester Nar	ne		Date:				\$750
equester Nar	nature		Date:			Sales Tax	\$750
Trinidad Cistequester Nardequester Sign	nature	Name	Date:			Sales Tax Shipping	\$750 \$0.00 \$0.00
equester Nar equester Sign Dominique equester 2 or	nature		Date:			Sales Tax Shipping	\$750 \$0.00 \$0.00

D@							
Name					Tax ID/SS#		
Address					Requester	Trinic	dad Cisneros
City		State	Zip Code		Department	College	of Vet Medicine
					Campus Extens	ion	5557
	d. Incomplete for	ms will be retu	rned to requester result	ing in	Payment Date	6/18/202	20
payment delay. **Only under sp	ecial circumstanc		be allowed to be picked partment check is to be		Payment Type	Electron	ic
FUND	ORG	ACCT	PROG	ACTV (optional)	DESCRIPTIO	N	Amount
						Subtotal:	\$1250
equester Nan	ne	,	Date:	6/17/20	-	Subtotal: Sales Tax	\$1250 - \$0.00
equester Nan	ne		Date:	6/17/20	- ! -		•
Trinidad Cisi equester Nan equester Sigr	nature	,	Date:	6/17/20	- - :	Sales Tax	\$0.00
equester Nan equester Sigr	nature	ame	Date:	6/17/20	- - :	Sales Tax Shipping	\$0.00
equester Nan equester Sign Devendra K	nature		Date:	6/17/20	- - :	Sales Tax Shipping	\$0.00

ID@							
Name	(Tax ID/SS#		
Address					Requester	Trini	idad Cisneros
City		State	Zip Code		Department	College	of Vet Medicine
Country					Campus Extens	sion	5557
	ired. Incomplete fo	orms will be return	ned to requester resulting	ng in	Payment Date	6/18/202	20
payment delay **Only under s	y. special circumstar		pe allowed to be picked partment check is to be		Payment Type	Electron	nic
FUND	ORG	ACCT	PROG	ACTV (optional)	DESCRIPTIO	DN .	Amount
-					M Summer Scholars Re gram - Stipend Installm		\$1,250.00
Frinidad Ci	sneros				gram - Stipend Installm	ent 2 of 4	
	ame				gram - Stipend Installm		\$1,250.00 \$1250 \$0.00
equester Na	ame		Date:	Prov	gram - Stipend Installm	subtotal:	\$1250
equester Na equester Si	gnature		Date:	Prov	gram - Stipend Installm	Subtotal:	\$1250
Trinidad Ci equester Na equester Si Dominique	gnature		Date:	Prov	gram - Stipend Installm	Subtotal: Sales Tax Shipping	\$1250 \$0.00 \$0.00

ID@							
Name					Tax ID/SS#		
Address					Requester	Trinic	lad Cisneros
City		State	Zip Code		Department	College	of Vet Medicine
Country					Campus Extens	sion	5557
All fields require	d. Incomplete fo	orms will be return	ned to requester resultin	ng in	Payment Date	6/18/202	0
payment delay. **Only under spe	ecial circumstar	nces will checks b **Dep	pe allowed to be picked partment check is to be	up by individuals returned.	Payment Type	Electroni	С
FUND	ORG	ACCT	PROG	ACTV (optional)	DESCRIPTIO	N	Amount
				ΡΙΟ <u>΄</u>	gram - Stipend Installm	ent 2 or 4	\$1625
Frinidad Cisr	neros			FIO		Subtotal:	\$1625
			Date:	6/17/20	; -		
equester Nam	ne		Date:		\$ - \$	Subtotal:	\$1625
Trinidad Cisr equester Nam equester Sign	nature		Date:		· · · · · · · · · · · · · · · · · · ·	Subtotal: Sales Tax	\$1625 \$0.00

ID@							
Name					Tax ID/SS#		
Address					Requester	Trinid	lad Cisneros
City		State	Zip Code		Department	College of	of Vet Medicine
Country					Campus Extens	sion	5557
All fields require	d. Incomplete fo	orms will be return	ned to requester resultin	ng in	Payment Date	6/18/202	0
payment delay. **Only under sp	ecial circumstar		pe allowed to be picked partment check is to be		Payment Type	Electronic	С
FUND	ORG	ACCT	PROG	ACTV (optional)	DESCRIPTIO	DN	Amount
				FIO	gram - Stipend Installm	ent 2 of 4	
Trinidad Cisı	neros			FIO		Subtotal:	\$1625
			Date:	6/17/20	·		\$1625
equester Nan	ne		Date:		· · · · · · · · · · · · · · · · · · ·	Subtotal:	
equester Nan	ne nature		Date:		· · · · · · · · · · · · · · · · · · ·	Subtotal: Sales Tax	
equester 2 or	Griffon Supervisor	Name	Date:		· · · · · · · · · · · · · · · · · · ·	Subtotal: Sales Tax Shipping	\$0.00 \$0.00

ID@					_		
Name					Tax ID/SS#		
Address					Requester	Trin	idad Cisneros
City		State	Zip Code		Department	College	of Vet Medicine
Country					☐ Campus Extens	sion	5557
All fields require	d. Incomplete fo	orms will be retur	ned to requester resulting	ng in	Payment Date	6/18/20	20
payment delay. **Only under sp	ecial circumstar	nces will checks b **Dep	pe allowed to be picked partment check is to be	up by individuals returned.	Payment Type	Electror	nic
FUND	ORG	ACCT	PROG	ACTV (optional)	DESCRIPTIO)N	Amount
-							\$250.00
Trinidad Cia							
				6/17/20	1 -	Subtotal:	\$250
equester Nan	ne		Date:	6/17/20	1 -		
equester Nan	ne		Date:	6/17/20] -	Subtotal:	\$250
Trinidad Cisi equester Nan equester Sign	ne nature		Date:	6/17/20	- - - -	Subtotal: Sales Tax	\$250
equester Nan	nature Griffon		Date:	6/17/20	- - - -	Subtotal: Sales Tax Shipping	\$250 \$0.00 \$0.00
equester Nan equester Sigr Dominique equester 2 or	nature Griffon	Name	Date:	6/17/20	- - - -	Subtotal: Sales Tax Shipping	\$250 \$0.00 \$0.00

ID@							
Name					Tax ID/SS#		
Address					Requester	Trini	idad Cisneros
City		State	Zip Code		Department	College	of Vet Medicine
					 Campus Extens	sion	5557
	d. Incomplete fo	orms will be return	ned to requester resulting	ng in	Payment Date	6/18/20	20
payment delay. **Only under sp	ecial circumstar	nces will checks b **Dep	pe allowed to be picked partment check is to be	up by individual returned.	Payment Type	Electror	nic
FUND	ORG	ACCT	PROG	ACTV (optional)	DESCRIPTIO	ON .	Amount
						Subtotal:	\$1250
equester Nan	ne		Date:	6/17/20	٠ .	Subtotal: Sales Tax	\$1250
equester Nan	ne		Date:	6/17/20]		
equester Nan equester Sigr	ne nature		Date:	6/17/20	- - -	Sales Tax	\$0.00
Trinidad Cisi equester Nan equester Sign Dominique equester 2 or	Griffon Supervisor	Name	Date:	6/17/20	- - -	Sales Tax Shipping	\$0.00

ID@							
Name					Tax ID/SS#		
Address					Requester	Trini	dad Cisneros
City		State	Zip Code		Department	College	of Vet Medicine
Country					│ │ Campus Extens	sion	5557
All fields require	ed. Incomplete fo	orms will be return	ned to requester resultin	ng in	Payment Date	6/18/202	20
payment delay. **Only under sp	ecial circumstar		pe allowed to be picked partment check is to be		Payment Type	Electron	nic
FUND	ORG	ACCT	PROG	ACTV (optional)	DESCRIPTIO	DN .	Amount
					gram - Stipend Installm	IGHL 2 01 4	\$1,250.00
Trinidad Cis	neros				·	Subtotal:	
				6/17/20	· •		\$1250
equester Nar	ne		Date:		· · · · · · · · · · · · · · · · · · ·	Subtotal:	\$1250
Trinidad Cistequester Nar equester Sig	nature		Date:		· · · · · · · · · · · · · · · · · · ·	Subtotal: Sales Tax	\$1250
equester Nar equester Sig Dominique equester 2 or	Griffon Supervisor I	Name	Date:		· · · · · · · · · · · · · · · · · · ·	Subtotal: Sales Tax Shipping	\$1250 \$0.00 \$0.00

ID@							
Name					Tax ID/SS#		
Address					Requester	Trinic	dad Cisneros
City		State	Zip Code		Department	College	of Vet Medicine
					Campus Extens	sion	5557
	d. Incomplete fo	orms will be return	ned to requester resultin	ng in	Payment Date	6/18/202	20
payment delay. **Only under sp	ecial circumstar	nces will checks b **Dep	pe allowed to be picked partment check is to be	up by individuals returned.	Payment Type	Electron	ic
FUND	ORG	ACCT	PROG	ACTV (optional)	DESCRIPTIO	N	Amount
							\$1250
					•	Subtotal:	\$1250 \$1250
equester Nan	ne			6/17/20	-	Subtotal: Sales Tax	
equester Nan	ne		Date:	6/17/20	- \$ -		\$1250
Trinidad Cisi equester Nan equester Sigr	ne nature		Date:	6/17/20	- : - :	Sales Tax	\$1250
equester Nan equester Sigr Dominique equester 2 or	nature Griffon	Name	Date:	6/17/20	- : - :	Sales Tax Shipping	\$1250 \$0.00 \$0.00

ID@							
Name					Tax ID/SS#		
Address					Requester	Trini	dad Cisneros
City		State	Zip Code		Department	College	of Vet Medicine
Country					Campus Extens	sion	5557
All fields require		orms will be return	ned to requester resulti	ng in	Payment Date	6/18/202	20
payment delay. **Only under sp			pe allowed to be picked partment check is to be		Payment Type	Electron	nic
FUND	ORG	ACCT	PROG	ACTV (optional)	DESCRIPTIO	DN	Amount
	7091220						\$750.00
						Subtotal:	\$750.00 \$750.00
Trinidad Cis	neros		Date:	6/17/20	٠ .		
Trinidad Cis	neros ne		Date:	6/17/20] -	Subtotal:	\$750
Trinidad Cis equester Nar equester Sig	neros		Date:	6/17/20	- - -	Subtotal: Sales Tax	\$750
Trinidad Cisequester Narequester Sig	neros me nature Griffon r Supervisor	Name	Date:	6/17/20	- - -	Subtotal: Sales Tax Shipping	\$750 \$0.00 \$0.00

ID@								
Name						Tax ID/SS#		
Address						Requester	Trinida	ad Cisneros
City		State	Zip C	ode		Department	College of	f Vet Medicine
Country						Campus Exten	sion	5557
All fields require	d. Incomplete fo	orms will be return	ned to requester	resulting in		Payment Date	6/18/2020)
payment delay. **Only under sp	ecial circumstar		be allowed to be partment check is	picked up by indivi s to be returned.	duals	Payment Type	Electronic	;
FUND	ORG	ACC						
							I .	
Trinidad Cis	neros						Subtotal:	\$500
Frinidad Cis	neros			eate: 6/17/20			Subtotal: Sales Tax	\$500
Trinidad Cis			D	eate: 6/17/20				
O DO C			D	eate: 6/17/20			Sales Tax	\$0.00
Dominique	Griffon		D	eate: 6/17/20			Sales Tax Shipping	\$0.00 \$0.00
Dominique equester 2 or	Griffon	Name	D	eate: 6/17/20			Sales Tax Shipping	\$0.00 \$0.00
Dominique equester 2 or	Griffon	Name		eate: 6/17/20			Sales Tax Shipping	\$0.00 \$0.00
Dominique equester 2 or	Griffon Supervisor	Name		6/17/20		Offic	Sales Tax Shipping Total	\$0.00 \$0.00

ID@							
Name					Tax ID/SS#		
Address					Requester	Trini	idad Cisneros
City		State	Zip Code		Department	College	of Vet Medicine
Country					Campus Extens	sion	5557
All fields require	d. Incomplete fo	orms will be returne	ed to requester resultin	ng in	Payment Date	6/18/20	20
payment delay. **Only under sp	ecial circumstan		allowed to be picked rtment check is to be		Payment Type	Electror	nic
FUND	ORG	ACCT	PROG	ACTV (optional)	DESCRIPTIO)N	Amount
				Prog	ram - Stipend Installm		\$0.00 \$750.00
				Prog			
				6/17/20	•		\$750.00
equester Nan	ne		Date:		· · · · · · · · · · · · · · · · · · ·	Subtotal:	\$750.00 \$750.00
equester Nan equester Sigr	nature		Date:		· ·	Subtotal: Sales Tax	\$750.00 \$750.00 \$0.00
Trinidad Cisi equester Nan equester Sign Dominique equester 2 or	nature Griffon		Date:		· ·	Subtotal: Sales Tax Shipping	\$750.00 \$750.00 \$0.00 \$0.00

D@							
Name					Tax ID/SS#		
Address					Requester	Trinic	dad Cisneros
City		State	Zip Code		Department	College	of Vet Medicine
Country					Campus Extens	sion	5557
All fields required	d. Incomplete for	ms will be retur	rned to requester resulti	ng in	Payment Date	6/18/202	20
payment delay. **Only under spe	ecial circumstand		be allowed to be picked partment check is to be		Payment Type	Electroni	ic
FUND	ORG	ACCT	PROG	ACTV (optional)	DESCRIPTIO	ON	Amount
						\$	\$750.00
Frinidad Cisr	neros					\$ubtotal:	\$750.00
		•	Date:	6/17/20	-		
equester Nam	ne		Date:	6/17/20	- :	Subtotal:	\$750
equester Nam equester Sign	ne nature		Date:	6/17/20	- ! - !	Subtotal: Sales Tax	\$750
Trinidad Cisr equester Nam equester Sign Dominique (aature Griffon	lame	Date:	6/17/20	- ! - !	Subtotal: Sales Tax Shipping	\$750
equester Namequester Sign	aature Griffon		Date:	6/17/20	- ! - !	Subtotal: Sales Tax Shipping	\$750

ID@							
Name					Tax ID/SS#		
Address					Requester	Trinid	lad Cisneros
City		State	Zip Code		Department	College	of Vet Medicine
Country					Campus Extens	sion	5557
	ed. Incomplete fo	orms will be return	ned to requester resulting	ng in	Payment Date	6/18/202	0
payment delay. **Only under sp	oecial circumstar		pe allowed to be picked partment check is to be		Payment Type	Electroni	С
FUND	ORG	ACCT	PROG	ACTV (optional)	DESCRIPTIO	on .	Amount
26				Prog	gram - Stipend Installm	ent 2 of 4	\$1250
26				Prog	gram - Stipend Installm	ent 2 of 4	\$1250
				Prog		subtotal:	\$1250 \$1250
			Date:	6/17/20	-		
equester Na	me		Date:		\$ - \$	Subtotal:	\$1250
Trinidad Cis equester Nar equester Sig	me nature		Date:		· · · · · · · · · · · · · · · · · · ·	Subtotal: Sales Tax	\$1250 \$0.00
equester Name equester Signoninique equester 2 o	me nature		Date:		· · · · · · · · · · · · · · · · · · ·	Subtotal: Sales Tax Shipping	\$1250 \$0.00 \$0.00

ID@							
Name					Tax ID/SS#		
Address					Requester	Trini	idad Cisneros
City		State	Zip Code		Department	College	of Vet Medicine
					│ <mark>│</mark> Campus Extens	sion	5557
	d. Incomplete f	orms will be retur	ned to requester resultir	ng in	Payment Date	6/18/20	20
payment delay. **Only under spo	ecial circumstar	nces will checks t **Dep	pe allowed to be picked partment check is to be	up by individuals returned.	Payment Type	Electror	nic
FUND	ORG	ACCT	PROG	ACTV (optional)	DESCRIPTIO	DN	Amount
4					gram - Stipend Installm		 \$377.25
					3		\$377.25
							\$377.25 \$1250
equester Nan	ne		Date:	6/17/20	• • • • • • • • • • • • • • • • • • •		
equester Nan	ne		Date:		\$ - !	Subtotal:	\$1250
Trinidad Cisi equester Nan equester Sigr	ne nature		Date:			Subtotal: Sales Tax	\$1250
equester Name equester Sign	nature Griffon	Name	Date:			Subtotal: Sales Tax Shipping	\$1250 \$0.00 \$0.00

D@							
Name					Tax ID/SS#		
Address					Requester	Trinid	ad Cisneros
City		State	Zip Code		Department	College o	f Vet Medicine
Country					Campus Extens	sion	5557
All fields require	d. Incomplete fo	orms will be return	ed to requester resulti	ng in	Payment Date	6/18/2020)
payment delay. **Only under sp	ecial circumstan	nces will checks be **Depa	e allowed to be picked artment check is to be	up by individuals returned.	Payment Type	Electronic	3
FUND	ORG	ACCT	PROG	ACTV (optional)	DESCRIPTIO	N	Amount
	0				l Summer Scholars Re ram - Stipend Installm		\$1250
						Subtotal:	\$1250
			Date:	6/17/20	-	Subtotal: Sales Tax	\$1250
equester Nan	ne		Date:	6/17/20	- !		
Trinidad Cisi equester Nan equester Sigr	ne nature		Date:	6/17/20	- ! - !	Sales Tax	\$0.00
equester Nan equester Sigr Dominique equester 2 or	nature Griffon		Date:	6/17/20	- ! - !	Sales Tax Shipping	\$0.00 \$0.00

ID@							
Name		а			Tax ID/SS#		
Address					Requester	Trinic	lad Cisneros
City		State	Zip Code		Department	College	of Vet Medicine
Country					Campus Extens	ion	5557
All fields required	d. Incomplete fo	orms will be return	ned to requester resulting	ng in	Payment Date	6/18/202	0
payment delay. **Only under spe	ecial circumstar	nces will checks b **Dep	pe allowed to be picked partment check is to be	up by individuals returned.	Payment Type	Electroni	С
FUND	ORG	ACCT	PROG	ACTV (optional)	DESCRIPTIO	N	Amount
					/I Summer Scholars Re gram - Stipend Installm		\$1250
Frinidad Cisr	neros				gram - Stipend Installm		\$1250 \$1250
equester Nam	ie 				gram - Stipend Installm	ent 2 of 4	
equester Nam	ie 		Date:	Prog	gram - Stipend Installm	ent 2 of 4 Subtotal:	\$1250
Trinidad Cisr equester Nam equester Sign	ature		Date:	Prog	gram - Stipend Installm	Subtotal:	\$1250 \$0.00

ID@							
Name					Tax ID/SS#		
Address					Requester	Trini	dad Cisneros
City		State	Zip Code		Department	College	of Vet Medicine
Country					Campus Extens	sion	5557
All fields requi		orms will be return	ned to requester resulti	ng in	Payment Date	6/18/202	20
payment delay **Only under s	y. special circumstan		pe allowed to be picked partment check is to be		Payment Type	Electron	nic
FUND	ORG	ACCT	PROG	ACTV (optional)	DESCRIPTIO	N	Amount
					gram - Stipend Installm	ent 2 Oi 4	\$1,250.00
Trinidad Ci	isneros			Fio		Subtotal:	\$1,250.00
			Date:	6/17/20	· •		
equester Na	ame		Date:		· · · · · · · · · · · · · · · · · · ·	Subtotal:	\$1250
Trinidad Ci equester Na equester Si Devendra	ame		Date:		· · · · · · · · · · · · · · · · · · ·	Subtotal: Sales Tax	\$1250
equester Na equester Si Devendra	gnature	Name	Date:		· · · · · · · · · · · · · · · · · · ·	Subtotal: Sales Tax Shipping	\$1250 \$0.00 \$0.00

Name					Tax ID/SS#		
Address					Requester	Trinic	dad Cisneros
City		State	Zip Code		Department	College	of Vet Medicine
Country					Campus Extens	sion	5557
All fields require	ed. Incomplete fo	orms will be return	ned to requester resulti	ng in	Payment Date	6/18/202	0
payment delay. **Only under sp	ecial circumstar		pe allowed to be picked partment check is to be		Payment Type	Electroni	C
FUND	ORG	ACCT	PROG	ACTV (optional)	DESCRIPTIO	N	Amount
					•	Subtotal:	\$1625
equester Nan	ne		 Date:	6/17/20	-	Subtotal: Sales Tax	\$1625 \$0.00
equester Nan	ne		Date:	6/17/20	- ! -		
equester Nan	nature		Date:	6/17/20	- ! - !	Sales Tax	\$0.00
equester 2 or	nature	Name	Date:	6/17/20	- ! - !	Sales Tax Shipping	\$0.00 \$0.00

ID@					_		
Name					Tax ID/SS#		
Address					Requester	Trin	idad Cisneros
City		State	Zip Code		Department	College	of Vet Medicine
<u> </u>					 Campus Extens	sion	5557
	d. Incomplete fo	orms will be return	ned to requester resultin	ng in	Payment Date	6/18/20	20
payment delay. **Only under sp	ecial circumstar	nces will checks b **Dep	pe allowed to be picked partment check is to be	up by individual returned.	Payment Type	Electro	nic
FUND	ORG	ACCT	PROG	ACTV (optional)	DESCRIPTIO	DN	Amount
			·				\$750.00
Frinidad Cisi	neros					Subtotal:	
			Date:	6/17/20	- 1	Subtotal: Sales Tax	\$750.00 \$750 \$0.00
Trinidad Cisi equester Nan equester Sigr	ne		Date:	6/17/20] .		\$750
equester Nan	nature		Date:	6/17/20	- - -	Sales Tax	\$750

Name					Tax ID/SS#		
Address					Requester	Trin	nidad Cisneros
City		State	Zip Code		Department	College	e of Vet Medicine
Country					Campus Exte	nsion	5557
All fields require	d. Incomplete fo	orms will be retur	ned to requester resulti	ng in	Payment Date	6/18/20)20
payment delay. **Only under sp	ecial circumstar	nces will checks t **Dep	pe allowed to be picked partment check is to be	up by individua returned.	Payment Type	Electro	nic
FUND	ORG	ACCT	PROG	ACTV (optional)	DESCRIPT	ION	Amount
-							\$750.00
Frinidad Cisi	neros					Subtotal:	\$750.00 \$750
			Date:	6/17/20		Subtotal: Sales Tax	\$750
equester Nan	ne		Date:	6/17/20			\$750
Trinidad Cisi equester Nan equester Sigr	nature		Date:	6/17/20		Sales Tax	\$750

ID@							
Name					Tax ID/SS#		
Address					Requester	Trinic	dad Cisneros
City		State	Zip Code		Department	College	of Vet Medicine
					Campus Extens	sion	5557
	d. Incomplete fo	orms will be return	ned to requester resultin	ng in	Payment Date	6/18/202	.0
payment delay. **Only under spe	ecial circumstar	nces will checks b **Dep	pe allowed to be picked partment check is to be	up by individuals returned.	Payment Type	Electroni	C
FUND	ORG	ACCT	PROG	ACTV (optional)	DESCRIPTIO	N	Amount
					gram - Stipend Installm		\$725
Trinidad Cisr	neros					Subtotal:	\$725
equester Nan	ne			6/17/20	·		
	ne		Date:		\$ - \$	Subtotal:	\$725
equester Nan	nature		Date:		· · · · · · · · · · · · · · · · · · ·	Subtotal: Sales Tax	\$725

Name	ria	an			Tax ID/SS#	ŧ	
Address					Requester	Т	Trinidad Cisneros
City		State	Zip Code		Departmen	Colle	ege of Vet Medicir
Country					Campus Ex	tension	5557
All fields require	ed. Incomplete fo	orms will be retur	ned to requester resulting	ng in	Payment D	ate 6/18/	/2020
payment delay. **Only under sp	ecial circumstar	nces will checks b **Dep	pe allowed to be picked partment check is to be	up by individua returned.	Payment Ty	ype Elect	tronic
FUND	ORG	ACCT	PROG	ACTV (optional)	DESCR	DESCRIPTION	
i							\$250.00
Trinidad Cis						Subtota	
Trinidad Cis			Date:	6/17/20		Subtota Sales T	al: \$250
equester Nar	ne		Date:	6/17/20			al: \$250
	nature		Date:	6/17/20		Sales T	al: \$250