

UW–Madison Check Order Form for Individual Checking Accounts

Email this completed form to Cash Management at cstdnfd@bussvc.wisc.edu.

Date: _____

Prepared by: _____

Phone number: _____ Email: _____

Bank Account Title:

University of Wisconsin System-Madison Non Payroll _____
Name of the project, study, or department

UW–Madison employee contact for this bank account: _____

Phone number: _____ Email: _____

Check Order Form

Bank Account number (last 5 digits): _____

Checks printed as shown on bank statement:

Name: University of Wisconsin System – Madison Non Payroll

Address: _____

City: _____ State: _____ Zip code: _____

Phone number on check (optional): _____

Ship to address (required):

Department: _____

In care of: _____

Street address: _____

City: _____ State: _____ Zip code: _____

All checks will be as follows:

Type – Personal size checks **Product #: 51200N**

All checks must include "VOID IN 90 DAYS"

New order - Checks will start with #1001 Reorder – Start check numbers with _____

Order quantity (select one): 80 160 320

Pay check charges using a Direct Payment (DP) Form. ([Please see the Direct Payment Form instructions on the Division of Business Services website.](#)) You will receive the checks in approximately 10 business days.