

**SAN DIEGO COMMUNITY COLLEGE DISTRICT
REQUEST FOR SPECIAL HANDLING OF B-WARRANTS**

PLEASE SEND THIS FORM TO ROBIN WATKINS Rwatkins@sdccd.edu

To: Accounts Payable

Fr: _____

Phone/E-mail address: _____

Re: Please pull and forward the following warrants to me for special handling:

College & room number: _____

For pick up at DO Accounts Payable : Yes ☐ No ☐

Phone/E-mail address: _____

Date of Warrant: _____

Payee /Employee ID	Payee/Employee Name	Warrant No. For AP staff use only	Amount
1. _____	_____	_____	_____
2 _____	_____	_____	_____
3 _____	_____	_____	_____
4 _____	_____	_____	_____
5 _____	_____	_____	_____
6 _____	_____	_____	_____
7 _____	_____	_____	_____
8 _____	_____	_____	_____
9 _____	_____	_____	_____
10 _____	_____	_____	_____
11 _____	_____	_____	_____
12 _____	_____	_____	_____
13 _____	_____	_____	_____
14 _____	_____	_____	_____
15 _____	_____	_____	_____

Received by: _____

Date: _____

The San Diego Community College District is committed to a safe and equitable learning environment for all students and employees. It does not discriminate on the basis of sex or gender in its educational programs and employment. Please refer to the SDCCD Board Policy 3410: NONDISCRIMINATION at the link below. For details and contact information: <https://www.sdccd.edu/students/titleix/> SDCCD Board Policy 3410