-- RUSH --

Monsanto **CHECK REQUEST**

REMIT-TO NO.	VENDOR REFERENCE (MAX. 12 CHARACTERS TO APPEAR ON REMITTANCE ADVICE)

DATE OF REQUEST	DUE DATE	PAYMENT AMOUNT	SALES TAX INCLUDED IN AMT PAID	ITEM TYPE
11-16-83	11 28 83	43 000 00		CR

NAME OF PAYEE
The Ohio State University

Research Foundation

ADDRESS OF PAYEE
Attn. James A. DeStazio

1314 Kinnear Road

CITY: Columbus
STATE: OH
ZIP CODE: 43212

IRS 1099 INFORMATION
(CHECK APPROPRIATE BOX IF PAYMENT IS TO BE REPORTED TO THE IRS UNDER 1099 REGULATIONS)

- [ ] 2 RENTS
- [ ] 3 ROYALTIES
- [ ] 4 FEES, COMMISSIONS
- [ ] 5 PRIZES, AWARDS

61N

MESSAGE TO APPEAR ON CHECK REMITTANCE ADVICE (MAX. 60 CHARACTERS)

Payment For OSURF Project No. 715618/763767)

IF ENCLOSURE IS TO ACCOMPANY CHECK, ATTACH AND CHECK BOX

[X] ENCLOSURE CODE

Please use attached envelope and call D. Goule at 4-2122 when mailed so that carbon copies can be sent.

IF CHECK IS TO BE DELIVERED TO AN INDIVIDUAL OR ADDRESS DIFFERENT THAN ABOVE, CHECK SPECIAL HANDLING BOX, SPECIFY THE PERSON AND ADDRESS FOR DELIVERY AND SECURE CONTROLLERS OFFICE APPROVAL FOR SPECIAL HANDLING.

SPECIAL HANDLING [ ] A

SPECIAL HANDLING APPROVAL

REASON FOR PAYMENT
Payment Due Per Signed Contract With OSURF

REQUESTED BY: [signature] DEPARTMENT APPROVAL: [signature] DEPARTMENT ACCOUNTING APPROVAL

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ACCOUNTING DISTRIBUTION

ACCOUNT CO	DIV	LOC	MAIN	SUB	Class	AMOUNT	CR	Tax Code	NDI	MATERIAL CODE	QUANTITY	OTHER TYPE	DETAIL (15 CHARACTERS)
	43	000	760	52	168	43 000 00							

A-118-V (Rev. 5/82)

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