

Check Appropriate Box:

CHECK REQUEST

PURCHASE ORDER REQUEST

Requested By: _____

Department: _____

Date: _____

ID Number _____

Request Number: _____

QUANTITY	ITEM DESCRIPTION	UNIT PRICE	TOTAL COST THIS ITEM	ACCOUNT NUMBER

TOTAL DOLLARS

VENDOR INFORMATION

Department Chair Approval: _____

NAME: _____

CONTACT: _____

PHONE: () _____

A
D
D
R
E
S
S

APPROVAL - BUSINESS OFFICE USE ONLY

CHECK NUMBER: _____

TRANSACTION NUMBER: _____

DATE OF CHECK: _____

PREPARED BY: _____

AUTHORIZED BY: _____

Vendor Code	Invoice Date	Invoice #	Invoice Due Date
Total Amount of Check			
\$ _____			

Business Manager	Date	Authorized Purchase Order #	Project

BUSINESS OFFICE COPY