

Request for Purchase (Purchase Order, Credit Card, or Warrant)

ACCOUNTING INFORMATION

SCHOOL _____

Dept/Activity/Club _____

Requested By _____ Date _____

Student Rep _____ Date _____

Prime ASB Advisor _____ Date _____
 (Signature required for ASB Purchases)

REQ.# _____

PO # _____

RECV'D IFAS _/_/___

Credit Card Purchase

Warrant Request (Bus. Off.)

Imprest Check # _____

Purchase Amnt: _____

Other Information: _____

VENDOR _____ PEID _____

PHONE _____ FAX _____

BUDGET NUMBER _____

QTY.	UNIT	ITEM DESCRIPTION	UNIT PRICE	EXTENSION
SUB TOTAL				
SHIPPING/HANDLING (IF APPLICABLE)				
TAX				
TOTAL				

SPECIAL NOTES _____
