

# Hazen PO/Check Warrant/Credit Card Form

     **Purchase Order**

*This must be completed and approved by the ASB before any items are ordered or purchased.*

     **Check Warrant**

*To pay an invoice that has been approved by the ASB before purchasing.*

     **Credit Card**

*This must be completed and approved by the ASB before any items are ordered or purchased.*

Vendor	_____	Date of Request	_____
Address	_____	Req#	_____
City State Zip	_____	PO #	_____
Contact Person	_____	Check #	_____
Phone	_____	Activity	_____
Fax	_____	Account #	_____
Email	_____		

This is a requisition only, not an official purchase order. If approved, the official purchase order will be faxed or mailed by KEC.

Qty	Item #	Description	Unit Price	Total Cost
			S & H	
			Tax	
			<b>Total cost</b>	

*Items ordered without prior approval are the responsibility of the person who placed the order!*

**Coach/Club Advisor** \_\_\_\_\_  
signature and date

**Team/Club Leader (student)** \_\_\_\_\_  
signature and date

**ASB Treasurer** \_\_\_\_\_  
signature and date

**ASB Advisor/Athletic Director** \_\_\_\_\_  
signature and date

**Assistant Principal** \_\_\_\_\_  
signature and date

**ASB Bookkeeper** \_\_\_\_\_  
signature and date