



PO # \_\_\_\_\_

### TRANSACTION PURCHASE ORDER REQUEST FORM

Date Approved in Meeting Minutes: \_\_\_\_\_

**VENDOR INFORMATION**

Name: \_\_\_\_\_ Date: \_\_\_\_\_

Address: \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_

Submitted By: \_\_\_\_\_ Club: \_\_\_\_\_ Acct #: \_\_\_\_\_

Qty	Units	Description/Invoice #	Unit Price	Total

Are Funds Available: Yes No Bookkeeper: \_\_\_\_\_ Sub Total \$ \_\_\_\_\_

Approved Denied \*If denied see Activities Director Tax \$ \_\_\_\_\_

SPECIAL INSTRUCTION: \_\_\_\_\_ S & H \$ \_\_\_\_\_

Principal/Designee: \_\_\_\_\_ TOTAL \$ \_\_\_\_\_

ASB Treasurer: \_\_\_\_\_ ASB Advisor: \_\_\_\_\_

Club Treasurer: \_\_\_\_\_ Club Advisor: \_\_\_\_\_

### TRANSACTION CHECK REQUEST FORM

Meeting Minutes

Check # \_\_\_\_\_ Date Issued \_\_\_\_\_ Invoice # \_\_\_\_\_ Amount: \_\_\_\_\_ Date: \_\_\_\_\_

Check # \_\_\_\_\_ Date Issued \_\_\_\_\_ Invoice # \_\_\_\_\_ Amount: \_\_\_\_\_ Date: \_\_\_\_\_

Check # \_\_\_\_\_ Date Issued \_\_\_\_\_ Invoice # \_\_\_\_\_ Amount: \_\_\_\_\_ Date: \_\_\_\_\_

### JOURNAL ENTRY/TRANSFER

Journal Enter # \_\_\_\_\_ Date Issued \_\_\_\_\_ Invoice # \_\_\_\_\_ Amount: \_\_\_\_\_ Date: \_\_\_\_\_