



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

## TRANSACTION PURCHASE ORDER REQUEST FORM

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

### VENDOR INFORMATION

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

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

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

Activity/Fundraiser: \_\_\_\_\_ Date: \_\_\_\_\_

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: \_\_\_\_\_ Date: \_\_\_\_\_    **TOTAL \$** \_\_\_\_\_

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

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

## 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: \_\_\_\_\_