



Purchase Order and Reimbursement Form

Today's Date

For Reimbursement

CATEGORY (FOOD, PRIZES, SUPPLIES, ETC)	VENDOR & ADDRESS	BRIEF DESCRIPTION OF PURCHASING ITEMS	TOTAL PRICE OF LINE CATEGORY

THIS PORTION MUST BE FILLED OUT BY THE INDIVIDUAL THAT THE REIMBURSEMENT WILL BE MADE OUT TO: *This must be a faculty/staff member. Students cannot receive reimbursements.*

Requestor Name:

Phone Number:

Email:

Student ID/FACULTY ID:

Purchase Order Vendor Information. [Here is a list of vendors that take PO's, only updated once in awhile.](#)

Should attach a quote that includes

- **Vendor Name:**
- **Vendor Contact:**
- **Address:**
- **Phone Number:**
- **E-mail:**
- **Date of event**

Please include a statement of the purpose of these items for the event

Deliver On/Before:

Special Instructions, also includes if you want the PO mailed to vendor or if you'll hand deliver: