



PURCHASE REQUEST

NAME:

DATE:

DEPARTMENT:

DESCRIPTION OF ITEM(S):

1	
2	
3	
4	
5	

REASON FOR PURCHASE

VENDOR NAME: (ONLY USE 1 VENDOR PER FORM)

COST OF ITEM(S):

ITEM	COST PER ITEM	QUANTITY

PRINCIPAL APPROVAL APPROVAL:

DATE:

BOARD APPROVAL APPROVAL:

DATE:

FOR FINANCE DEPARTMENT USE ONLY

PROCUREMENT:

ACCOUNTING:

FINAL APPROVAL: _____
Managing Director *Date*

APPROVAL DATE: _____ **DATE ITEM(S) MAY BE PURCHASED:** _____

SOURCE OF FUNDS: _____ **RESERVING FUNDS:** _____

BUDGETED ☐

UNBUDGETED ☐