



**Check Request  
Purchase Order Requisition  
Cash Advance**

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

Payable To: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_

Please check applicable:  
 Check  
 P.O. Requisition  
 Cash Advance

ID#:  Employee  Student  Other

Date Required

DESCRIPTION	FUND	ORG	ACCOUNT	ACTIVITY <i>(Optional)</i>	AMOUNT
Total Amount to be Paid					

**Special Instructions (optional) :**  
 Worner Box # \_\_\_\_\_  
 Dates of Travel (cash advance) \_\_\_\_\_  
 Exception for sales tax reimbursment \_\_\_\_\_

**Other Instructions:** \_\_\_\_\_

**Purchase Order Use Only**

Signed Estimate attached Change Order  
 Sole Source Close P.O.  
 Do Not Send P.O. #  
 Over \$25,000 - Approval Needed (Lori Seager) \_\_\_\_\_  
 Vendor email address \_\_\_\_\_ Fiscal Year \_\_\_\_\_

**Requisitioned By** \_\_\_\_\_  
Print Name Signature Email Ext.

**Authorized ("2nd") Signature** \_\_\_\_\_  
Print Name Signature

**Department** \_\_\_\_\_

(Note: W-9/W-8 BEN needed for payees other than student or employee if not already on file)

W-9/W-8BEN On File W-9/W-8BEN Attached

Original receipts, invoices, or other documentation must accompany this form. Questions? Please contact Accounts Payable: x 6782, or Purchasing: x 6695

*Business Office Use / Approval:* \_\_\_\_\_