

PURCHASE ORDER REQUEST FORM

VENDOR TO BE PAID: _____

DATE NEEDED: _____

ADDRESS: _____

ACTIVITY NAME _____

CITY / ST / ZIP: _____ PHONE # _____

Qty	Description	Unit Cost	Total	Account Number			

Tax: _____
 Shipping: _____
 Total . . . _____

Please check here if this request was taken via Phone or E-mail. Date Received _____

 Requester's Signature

 Date Submitted

APPROVALS (For Office Use)	PURCHASE ORDER #
_____ Lodge Advisor or Designee Date	
_____ Staff Advisor or Designee Date	

Purchasing and Reimbursement Guidelines

1. PO Request must be submitted one week prior to purchase.
2. All Invoices that have a PO# issued must be mailed directly from the vendor to the council office.
3. All Invoices must have the GPC listed as the primary customer. This includes the council address and number 527.
4. Invoices may contain the optional information: c/o, Event Name, Lodge Name and Number.
5. This form must be submitted before any purchases are made or PO# issued.

