



Acct Descr.	
Account #	
Vendor #	
Batch Mo.	

Visa Purchase

****All receipts must be attached and turned into the business office within 3 business days of purchase.**

Originator: _____ Purchase Date: _____

Vendor Information:

Name _____

Address _____

City, State, Zip _____

Budget/Acct Descr: _____ FY: _____

Building Location: 3140 3125

Item #	Qty	Item Description	Unit Price	Total
Shipping:		Estimated Cost:	Total amount	

Signed: _____ Date: _____

Approved: _____ Date: _____

You can submit receipts and completed forms to the following email for processing chasevisa@vandercook.edu with your electronic signature and date or return paper copy to the business office.