



Acct Descr.	
Account #	
Vendor #	
Batch Mo.	

SHARE YOUR PASSION.

**PO#**

## Purchase Order

- Please fill out even if you received verbal approval
- Attach quotes or estimates received (when applicable)
- Checks will be disbursed upon receipt of invoice

I will place order     
  Front Office to place order     
  \_\_\_\_\_ will place order

Employee Purchaser: \_\_\_\_\_ Date: \_\_\_\_\_

**DEPT REQUIRED:** \_\_\_\_\_

**CHASE VISA:** \_\_\_\_\_

EVENT/ PURPOSE: \_\_\_\_\_ FY: \_\_\_\_\_

Vendor Information:

Name \_\_\_\_\_

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

Department Approval: \_\_\_\_\_ Date: \_\_\_\_\_

CFO/ President Approval: \_\_\_\_\_ Date: \_\_\_\_\_

**\*All purchase orders must be approved prior to ordering. You can submit completed copy to the following email for processing [accountspayable@vandercook.edu](mailto:accountspayable@vandercook.edu). An approved copy will be returned to you for order placement. Please allow 10 days for processing.**