

Required Finance Request Form



- Requisition (Purchase Request)*
- Debit Purchase*
- P-Card Purchase*
- Reimbursement/Check Request*

Your Name: _____ **Date:** _____

Vendor Information

Vendor:	
Address (if new):	
City, State, Zip:	
Contact Name:	
Phone:	
Fax:	
Email:	
Website:	

Business Office Use Only

Check #:	
Vendor's Account #	
Vendor's Order Number:	
School's P.O. Number:	

Authorization

Approval Signature**

Date

Please indicate which State or Federal Programs you are using. Multiple Programs? Check all that apply and provide details below.

<input type="checkbox"/> Special Education	<input type="checkbox"/> Foodservice	<input type="checkbox"/> LAND Trust	<input type="checkbox"/> Early Interventions
<input type="checkbox"/> Library	<input type="checkbox"/> Title II	<input type="checkbox"/> Gifted and Talented	<input type="checkbox"/> Other (Detail Below)

Please indicate which internal budgets/programs you are using. Multiple budgets? Check all that apply and provide details below.

<input type="checkbox"/> Classroom Supplies Budget (individual)	<input type="checkbox"/> Name of Class _____	<input type="checkbox"/> Class Period /Semester _____/_____ (ie: A1/2nd Semester)	<input type="checkbox"/> Library	<input type="checkbox"/> Custodial/Maintenance
			<input type="checkbox"/> Administration	<input type="checkbox"/> Other (Detail Below)

Quantity	Item Number	Description & Purpose with Program Details (as applicable)	Unit Cost	Total Cost

Additional Notes (e.g. Charge 5% to my classroom and 50% to the school per Mr. Seminario)

TOTAL:

*Purchases must be made according to state law, school policy and authorized budgets. School policies are available in employee handbooks/manuals and are also available in the Business Office.

**This form must have all applicable approval signature(s) before purchase or payment is made.

***SALES TAX IS NOT REIMBURSABLE FOR PURCHASES MADE WITH PERSONAL FUNDS-Utah State Tax Publication 25