Associated Students, Inc.

California State University, San Bernardino

P.O. #	
Date:	

Date of Request

REQUISITION FOR PURCHASE ORDERS AND CHECKS

Name of Requesting Committee/Organization

Account Number Account Name				Date needed (allow 3 days)		
After providi	ng all inform	e): Purchase Orde Credit Card Po ation and obtaining s Manuel Student U	urchases the necessary sig		Service	es
Supplies and	or Equipme	ent Description				
Quantity	Unit		Description		Unit Cost	Approx. Cost
Vendor:				Ç	Subtotal	
					Tax	
					Total	
Justification:	:					
A 11	D		/D / IA	11 401 5		/D
Approved by	Kepresentati	ive of Organization	Date Appro	oved by ASI Execu	itive Officer/D	rrector/Date: