



EMPLOY MILWAUKEE PURCHASE APPROVAL REQUEST FORM

Purchase Order

Check Request

PNC Credit Card

Electronic Payment

Petty Cash

Requestor's Name: _____

Date: _____

Pay To: _____

Address: _____

Do not mail check-hold for pick up

Do not mail check – forward to: _____

Include original documents with check

Include tax exemption certificate with check

Date Check is needed: _____

Funding Source: _____

Amount of Purchase: _____

Description: _____

Lists of participants/attendees and receipts must be turned in within 10 days of an event. Expenditures not supported with the required documentation are considered "disallowed costs". Disallowed costs will be deducted from the payroll check of the responsible person.

Requestor's Signature _____

Vice President's Signature _____

Manager's Signature _____

CFO's Signature _____

CEO's Signature (over \$3000) _____

-----For Accounting Use Only-----

Payee ID _____

Document Date _____

Due Date _____

CODE