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Purchase Order Request

New Life Community Church
 990 James Way
 Pismo Beach CA 93449
 805-489-3254

APPROVED PO#

<input type="checkbox"/>	Executive Pastor	
<input type="checkbox"/>	Accounting	
<input type="checkbox"/>	Department Head	
<input type="checkbox"/>	Requestor	

Submitted by: _____ **Department:** _____ **Date Submitted:** _____ **Date Needed:** _____

Payee Information:

Vendor: _____
Street Address: _____
City, State, Zip: _____
Phone Number: _____

Use this form to obtain approval for individual items over \$500 prior to spending. Use a separate form for each payee. Attach supporting documentation to this form.

Item	Description	Account No	Quantity	Unit Price	Total
Special Instructions				Subtotal	
				Tax	
				S&H	
				Other	
				Total	

Requestor Signature: _____ **Dept. Head Signature:** _____
Date: _____ **Date:** _____

