PURCHASE FORM Helena College

ORDER STATUS: (Complete all that apply.) PURCHASE ORDER # _____

ORDER HAS BEEN PLACED ☐ **Y / N** ☐ DATE ORDERED_____ ORDERED BY _____

ORDER HAS BEEN RECEIVED ☐ **Y / N** ☐ DATE RECEIVED_____ RECEIVED BY_____

ORDER WAS PLACED ON PURCHASING CARD ☐ **Y / N** ☐

RECEIPT/INVOICE MUST BE ATTACHED

VENDOR/PAYABLE TO_____ Index Paying _____

Complete Address _____ Date Submitted _____

_____ Submitted By _____

_____ Date Item Needed _____

Vendor Phone: _____

Vendor Email**:** _____

ACCOUNT CODE	INVOICE #	ITEM DESCRIPTION	QTY	UNIT COST	TOTAL
					$0.00
					$0.00
					$0.00
					$0.00
					$0.00
					$0.00
					$0.00
					$0.00
					$0.00
					$0.00
					$0.00
					$0.00
				Shipping and Handling (FOB DESTINATION)	
				ESTIMATED GRAND TOTAL	$0.00

Approved By:_____ Date:_____

Department Chair/Supervisor

Approved By:_____ Date:_____

Executive Director

Approved By:_____ Date:_____

Dean

VENDOR REGISTRATION:

Contacted: _____

Invited: _____

Follow Up: _____

RECEIVED BY BUSINESS OFFICE:

Vendor Id:_____

Date:_____ Banner #_____

Input:_____ Approved:_____