



# Arcadia Unified School District FOOTHILLS MIDDLE SCHOOL Purchase Order Request

**IMPORTANT:**

- Checks are approved at the ASB meetings on Tuesday.
- PO Requests must be submitted on Monday to be on the meeting agenda.
- PO Requests can only be approved at a business meeting *after* your pre-approval was submitted and approved by ASB council.

Organization \_\_\_\_\_ Activity Name \_\_\_\_\_

Pre-Approval Date \_\_\_\_\_ \$ \_\_\_\_\_ Pre-Approved \$ amount \_\_\_\_\_ Advisor – Print Name \_\_\_\_\_

**Purchase Description:**

\_\_\_\_\_

\_\_\_\_\_

Purchase Total: \$ \_\_\_\_\_

**Check One:**

- Direct Payment to Vendor (attach invoice)
  
- Reimbursement to Payee (attach receipt with payment verification)
  
- Refund for ASB

Payee/Vendor Name (to appear on check) \_\_\_\_\_ Payee email/phone \_\_\_\_\_

Street Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Select Option:    Mail Check    Place in Advisor’s Mailbox    Advisor will pick up

I declare under penalties of perjury that I purchased the above items for the Student Body of Foothills Middle School at no personal profit or gain.

Advisor Signature \_\_\_\_\_ Date \_\_\_\_\_ Club President Signature \_\_\_\_\_ Date \_\_\_\_\_

<b>ASB OFFICE ONLY</b>			
Date Received: _____	Approved	Denied	Divided Out
_____	_____	_____	_____
Activities Director Signature	Date	ASB Treasurer Signature	Date