



Purchase Approval Request

- ☐ Purchase Order ☐ Check Request ☐ PNC Credit Card
☐ Petty Cash ☐ Electronic Payment ☐ Other: _____

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: _____

List 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

CFO's Signature

Manager's Signature

CEO's Signature (over \$3000)

For Accounting Use Only			
Payee ID:			
Document Date:			
Due Date:			