

Vendor Name _____ Date _____ Purchase Order Check Request
 Address _____ City/Zip _____ Phone _____

YMCA of Orange County Purchase Order Requisition and Check Request - WCF

Item	Qty	Description	Unit Price	Total Amount	%	Coding				Amortize x Months	Starting on Month	Month to Expense	Explanation / Detail for Expenditure
						Fund -	Branch -	Dept -	PCS -				
Grand Total													

Special Handling Instructions _____ Date PO Req Submitted to AP _____

Return to Branch Other, Explain _____ Check Request Due Date _____

Item	YTD Budget	Monthly Budget	minus	Monthly Actual	equals	Monthly Variance	Comments
			-		=		
			-		=		
			-		=		
			-		=		

Requester's name (Print) _____ Date _____

Authorized Signature _____ Date _____



YMCA
 We build strong kids,
 strong families, strong communities.

Additional Signature _____ Date _____

Additional Signature _____ Date _____

Email Approval attached