

**LWVKC Purchase Form**

Invoice # \_\_\_\_\_

This form will be used for all expenditure, purchase or check requests.

Person Requesting Expenditure \_\_\_\_\_ Telephone \_\_\_\_\_

Date of Request \_\_\_\_\_

Purpose of Purchase: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Budget Category (see back) \_\_\_\_\_ Grant Fund(see back) \_\_\_\_\_

**Expenditure Request \*\***

Amount Requested \_\_\_\_\_

Amount Budgeted or Grant Approved \_\_\_\_\_

Approval (If Required) \_\_\_\_\_

**Check Request \*\***

Amount Requested \_\_\_\_\_

Amount Budgeted or Grant Approved \_\_\_\_\_

Approval(If Required) \_\_\_\_\_

Make Check Payable to: \_\_\_\_\_

Give or Mail Check to: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Vendor	Item	Price Each	Cost
<b>Total Cost</b>			

**Attach all receipts to the form and send to the Treasurer.**

**\*\* Any expenditure or check request greater than \$75 not budgeted or grant approved must be approved by the Board.**

Invoice Number will be assigned by Treasurer.

If you have questions, call Caroline at 816-333-6059 or email cmarnold@live.com

Date Paid \_\_\_\_\_ Check # \_\_\_\_\_ Amount \_\_\_\_\_ 6/21/19