

**CREDIT CARD  
REQUEST FORM**

**Grays Harbor College**

Purchase Requisition Form



Date of Request: \_\_\_\_\_  
Date of Shopping Trip: \_\_\_\_\_

Date Item(s) Required: \_\_\_\_\_

**Vendor Name:** \_\_\_\_\_ **Website Address:** \_\_\_\_\_  
**Physical Address:** \_\_\_\_\_ **Phone:** \_\_\_\_\_

List	Catalog or Item #	Description of Items	Qty	Price Per Unit	Total Cost <i>(Remember Sales Tax)</i>

BUDGET CODE INFORMATION					NOTES:
Fund	App.	Program	Object	SUB	
522	264				

Club Name & Point of Contact: \_\_\_\_\_ Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Club Advisor Signature / Date: \_\_\_\_\_

Budget Administrator  
Signature / Date: \_\_\_\_\_