

PROCUREMENT FORM

Please circle one:

Travel/Expense Statement

Purchase

Reimbursement

Please fill out the appropriate section below:

TRAVEL		Account # _____
Name _____	SS# _____	
Current Address _____		
1. Ticket was purchased by:	Self	Travel-On Omega
2. Are you requesting per diem of \$36/day?	Yes	No
3. Are you claiming mileage?	Yes	No Amount of Mileage: _____
Please attach all applicable receipts:		Purpose of Travel:
_____ Hotel receipt	_____ Meal receipts	
_____ Car Rental receipt	_____ Registration Fees	
_____ Parking receipt	_____ Gas receipts	
_____ Taxi/Subway/Bus receipt(s)	_____ Other	
<i>Please attach travel itinerary and receipt of plane ticket.</i>		

PURCHASE		Account # _____
Name _____	SS# _____	
Vendor Name _____	Vendor FEI# _____	
Vendor Address _____	Vendor Phone # _____	
Items to be Purchased:	Quantity:	Amount:
_____	_____	_____
_____	_____	_____
_____	_____	_____
TOTAL	_____	_____
<i>Please attach quote or purchase description.</i>		

REIMBURSEMENT		Account # _____
Name _____	SS# _____	
Current Address _____		
Purpose of Reimbursement: _____		
<i>Please attach receipts. For food reimbursement, please attach an itemized bill of the meal, the purpose of the meal, and the attendees' names.</i>		

Requestor _____

Date: _____