STAFF OPEN PO REQUEST FORM

A purchase order will be created for ____________________________

It will be created in the amount of _______________________________

- Staff must have a PO before making any purchases.
- PO must be approved/finalized before making purchases.
- To be reimbursed, original receipts are required and sent by month end of the spending.
- The intent of the purchase order is for reimbursable, last minute purchases.
  - No mingling personal and school related purchases.
  - No shipping to home or addresses other than LVUSD sites.
  - No cashing out any gift cards as payment.
  - No purchase of alcohol/tobacco/medicine.
- This is not to replace or to interfere with the vendor PO process.
- The staff member must keep track of their expenses.
- If the PO needs to be increased, this must be done by using this form.
- The PO modification must be approved before any additional purchases are made.
- This form must be attached to the Header of the purchase order that is created.

Staff Member Signature: _______________________

Print Name: _________________________________

Approval Signature: __________________________

Print Name: ________________________________

Date: _____________________________________

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****If requesting an increase, please provide the original PO# here:**

PO #________________