

PURCHASE ORDER



TROOP 72
TROOP72.com

Name: _____

Today's Date: _____

Total Amt. Requested: _____

Date that check is needed: _____

Description of expenses: _____

Date of purchase, Vendor: _____

Event: _____

PAYMENT

Pay to the order of: _____

Give check to: _____

Mailing address: _____

(enclose a self-addressed stamped envelope if possible)

Charge to this account:

- | | | |
|---|--|---------------------------------------|
| <input type="checkbox"/> Camping Equipment | <input type="checkbox"/> Boy's troop account | <input type="checkbox"/> Camping fees |
| <input type="checkbox"/> Scoutcraft equipment | <input type="checkbox"/> Training | <input type="checkbox"/> Registration |
| <input type="checkbox"/> Food for campout | <input type="checkbox"/> Travel | <input type="checkbox"/> Summer camp |
| <input type="checkbox"/> Badges and patches | <input type="checkbox"/> Other: _____ | |

Give this completed form to Kim Hoffman, 18644 - 74th Ave, CF 54729

TREASURER'S USE ONLY

Date Paid: _____ Check #: _____

Amount Paid: \$ _____ Account #: _____

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