

HUALAPAI TRIBAL ADMINISTRATION PURCHASE REQUISITION/DISBURSEMENT AUTHORIZATION

Name of Vendor or Traveler: _____

Date: _____

Check One Only:
 Purchase Order
 Check
 Travel Advance
 Credit Card
 Journal Entry

GENERAL FUND _____
 GRANTS & CONTRACTS _____

QUANTITY	ITEM DESCRIPTION	UNIT COST	

Signature of Traveler _____

TOTAL _____

Description of Purchase: _____

Program Director _____

Accounting _____

FOR ACCOUNTING USE ONLY

ACCOUNT CODE:	DESCRIPTION	AMOUNT
TOTAL		

Disbursement Account _____

Processed By _____

Disbursement Approved _____

Obligation Number _____

