The Illinois Club Order/Purchase Documentation Form

Name:		
Address:		
Phone number:	Email address:	
Date of purchase/order:		
Vendor:		
Vendor's address:		
Purpose of Purchase:		
Turpose of Turenase.		
Item(s):	Price/Cost:	Budget category/line:
Mathada Guarmanti		
Method of payment: Please check on	P	
		campus purchases only); will be billed
[attach o	rder form; send invoice when	received to Ranae Buck and treasurer]
	The Illinois Club; will be bille	
[attach o	rder form; send invoice when edit card; to be reimbursed	received to treasurer]
and ar ar	enn carn, to be remibuised	
cash or cr [attach re		

Please mail or email this completed form to:

treasurer@theillinoisclub.org