

# Trust Requisition

ASRCC / ASNC / ASMVC (Circle one)

Fiscal Year \_\_\_ / \_\_\_

Today's Date \_\_\_/\_\_\_/\_\_\_\_\_

| Accounting Services Use Only |
|------------------------------|
| PO# _____                    |
| Ck. # _____                  |
| Ck. Date: _____              |

**Vendor Information:**

Make Check Payable to: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 Student ID# (if applicable) \_\_\_\_\_

Account #: 710-000-00000-94 \_\_\_ - 9551  
 Account #: 710-000-00000-94 \_\_\_ - 9551  
 Account #: 710-000-00000-94 \_\_\_ - 9551

Account Name: \_\_\_\_\_  
 Account Name: \_\_\_\_\_  
 Account Name: \_\_\_\_\_

| Qty. | Item# / Receipt | Description | Unit Price | Total |
|------|-----------------|-------------|------------|-------|
|      |                 |             |            |       |
|      |                 |             |            |       |
|      |                 |             |            |       |
|      |                 |             |            |       |
|      |                 |             |            |       |

| Check All That Apply:  | This Transaction Is A?                    |
|--|---|
| Mail Purchase Order<br>Mail Check<br>Pickup Check at:<br><br>Moreno Valley College<br>Norco College<br>Riverside City College<br>District Office | Cash Advance<br>Reimbursement<br>Transfer |
| <b>Contact Information for Pickup:</b>   |   |
| Name: _____  | Email: _____                              |
| Phone: _____   | _____                                     |

**Total:** \_\_\_\_\_

\_\_\_\_\_  
 Club / Organization Advisor (print)

\_\_\_\_\_  
 Student Club Treasurer / Representative (Print)

\_\_\_\_\_  
 Dean of Student Life (Print)

\_\_\_\_\_  
 Signature

\_\_\_\_\_  
 Signature

\_\_\_\_\_  
 Signature

\_\_\_\_\_  
 Date

\_\_\_\_\_  
 Date

\_\_\_\_\_  
 Date