

# ASSOCIATED STUDENTS OF RIVERSIDE COMMUNITY COLLEGE DISTRICT

## BUDGET REQUISITION

Accounting Services Use

P.O. # \_\_\_\_\_

Ck. Date \_\_\_\_\_

Ck. # \_\_\_\_\_

Date: 05/29/2019

Reimbursement

(Name of Vendor)

2001 Norco College, Third Street, CA92860

(Address)

Account Number: 710 - 000 - 00000 - 94321 - 9551

QTY.	ITEM #	DESCRIPTION	UNIT PRICE	TOTAL
1		Supplies for Sexual Assault Awareness Event	\$ 70.07	\$ 70.07
				0.00
				0.00
				0.00
				0.00

Please circle the appropriate disposition:

Tax \_\_\_\_\_

☐ Mail purchase order    ☐ Transfer

Shipping \_\_\_\_\_

☐ Mail check    ☒ Pickup check at Cashier's Office

**TOTAL** \$ 70.07

Contact when check is ready:

Name: Edwin Romero

Phone: (951)372-7125

Email: edwin.romero@norcocollege.edu

~ ~ ~ ~ ~ APPROVAL ~ ~ ~ ~ ~

[Signature]    5/29/19  
Club Advisor/Organization Advisor    Date

[Signature]    5/29/19  
Associated Students Controller/Treasurer    Date

\_\_\_\_\_  
Student Club Treasurer//Representative    Date

[Signature]    5/29/19  
Coordinator, Student Activities    Date

\_\_\_\_\_  
Organization Representative    Date

[Signature]    5/29/19  
Dean, Student Life/Designee    Date