DURHAM TECHNICAL COMMUNITY COLLEGE PURCHASE ORDER APPROVAL

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VENDOD NAME:		VENDOR #: PO NUMBER:	
VENDOR NAME.			
ADDRESS:			
PO BOX:			
CITY:	STATE:	ZIP:	
GL ACCOUNT Code should has not been created			INVOICE AMOUNT
TC	TAL INVOICE AMOUNT:		
	INVOICE DATE		
APPROVED BY:			DATE:
FINANCE APPROVAL:			DATE:
ommodity Code:			
Business Office Use)			

Please email your completed form to accountspayable@durhamtech.edu for processing.