

CHINO VALLEY UNIFIED SCHOOL DISTRICT
Conference Warrant Request
Document In Lieu of Purchase Order

Date: _____

Vendor No.:		School/Dept.:		Business Dept. use only
Vendor Name:				Acct.# Correct: _____
Vendor Street Address:				Budget Amount: _____
Vendor City, State, Zip:				Initials: _____
Preparer Name:				Date: _____

Request for warrant must be accompanied by an itemized invoice with date and vendor name. **Allow four 4-6 weeks for normal processing.**

Name of Conference: _____

Amount: _____

Conference Attendee(s)	Budget #

Conference Location: _____

Conference Date(s): _____

Conference Registration Deadline: _____ **Check Deadline:** _____

All approval signatures required prior to submittal to Business Services:

 Signature, Preparer: _____ Date

 Signature, Program/Fund Administrator _____ Date

 Signature, Site Principal/Department Director _____ Date

 Signature of Business Services _____ Date

Print form on three-part NCR (available through Duplicating)

Distribution: White/Yellow: Business Pink: Site/Dept.

CVUSD 03-2015