

Eagle Sport Aviation Club

Purchase Authorization Form / Reimbursement Form

Please attach a copy of receipt, invoice or written quote

| Date Requested: | | | _ | Date Needed: | | | | |
|----------------------|--|----------------------|--------------------------------------|------------------------------------|---|--------------|------------|------|
| Vendor Name: | | | - | Submitted by: | | | | |
| Contact: | | | 4 | Phone: | | | | |
| Phone: | | | _ | Address: | | | | |
| Address: | | | 1 | | | | | |
| | | | _ | Officer Approval: | | | | |
| Division: | (Circle the appropriate name and tailnumber) | | | Electronic selection: | | | | |
| Name: Tailnumber: | Pitts N260AB | <u>Cub</u> N88157 | Glider N215ES N2445W N5844V | N411JR N244CG | Other General Supplies Contest (specify below) Public Relations | | | |
| Other / Comment: | | | | | | | | |
| Expenses: | ***Please atta | ch a copy of rece | int. invoice. or | written quote*** | Off | fice Use Onl | v (Pavment | ·) |
| Description: | Quantity: | | | Part or Catalog # - Other Comments | | Form | QB | Rect |
| | | | | | | | | |
| | | | | | | | | |
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| | | | | | | | | |
| | Total | : | | Reimbursement: | | | | |
| Purchase authoriza | ition: (Purchases | s must be approved | d by an authorize | d club officer and/or the treasure | r) | | | |
| Officer: | | | _ | Treasurer: | | | | |
| Signature: | | | _ | Signature: | | | | |

Submission:

After approval by appropriate officer of division, this form should be submitted to the ESAC Treasurer and/or mailed to:

Eagle Sport Aviation Club 1648 Taylor Road #234 Port Orange, FL 32128