



Karnes City Independent School District

Office of Finance

404 Highway 123 • Karnes City, TX 78118

Phone: (830) 780-2321 • FAX: (830) 780-3823

Business Office Use Only

PO# _____

Date _____

Notes:

VOUCHER REQUEST FORM

Date

Organization/Club

Campus

Account Code

Vendor/Payee

____ Mail Check to Vendor/Payee

____ Return Check to Campus

Address/City/State/Zip

____ Pick Up Credit Card
(Circle one: Chase, HEB, Wal-Mart)

Items to be purchased	Quantity	Unit Cost	Total

ORIGINAL RECEIPTS OR VENDOR'S INVOICE MUST BE ATTACHED

Total: \$ _____

Reason for purchase

Club Sponsor's Signature

Date

Principal' Signature

Date