



Purchase Order/Expense Voucher Form

Voucher No: \_\_\_\_\_  
Purchase Order No: \_\_\_\_\_

☐ Purchase Order

☐ Expense Voucher

Vendor Name: Maspeth Lock & Safe, CO.	Vendor Code:
Voucher Date: 7/23/19	Invoice Number: 8471
Address: 65-55 Grand Avenue Maspeth Lock, NY 11378-2433	Invoice Date: 7/10/19
	Due Date: UPON RECEIPT
	Ship to: SAME AS ADDRESS
Phone Number: 718-326-2908	
Vendor Terms: NET 30 DAYS	Bill to: SAME AS ADDRESS

Billable (Y/N).	Date	Item Description or Destination	Sub-Total	Amount
Y	7/23/19	CSS#, 19929, Repair Arms Room Vault, Invoice #8471, CMI#4721		\$780.00
TAX:				
(LESS) COMPANY CREDIT CARD:				
P.O. not to exceed:				
TOTAL: (Due to Employee / Vendor)				\$780.00

Steve Miller	511014	7/23/19
Voucher Completed by:	Employee No.	Date

Supervisor Signature:	Employee No.	Date
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Program Manager/Assistant Program Manager Signature:	Employee No.	Date
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Checked By:

Vice President, Administration Signature:	Employee No.	Date
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Reviewed By: