



MASTER PURCHASE ORDER

Please attach supporting details and documents. Upon approval, the business office will assign this project a MPO number.
ALL associated expenses must be tagged with correct MPO number.

Event/Project Name _____

Today's date _____ Event/Project Date _____

Requested by _____ Department _____

Total Cost _____ Oversight Name _____

Budgeted? Yes No

ACCT CODE	VENDOR/DESCRIPTION	AMOUNT	MONTH(S) OF SPENDING

Total Requested

Total Approved
(only if partially approved)

Oversight Approval Signature _____

Date _____

ACCOUNTING USE ONLY

Accounting Signature _____

MPO Number _____

Notes: