

Town of Berne: Requisition



Requestor	
Address	
City & State, Zip	
Email Address	
Phone Number	
Fiscal Year Required	
Purpose or Justification	
Department	
Contract or Bid Reference Number	
Budget Allotment	<input type="checkbox"/> Expense is within adopted budget <input type="checkbox"/> Expense exceeds adopted budget
Estimated Quantity if Applicable	
Other Notes :	
TOTAL REQUESTED	\$

REQUESTOR : I, _____, hereby certify that this requisition is made for the purpose stated and that the funds requested are necessary for municipal operations

Date

Signature & Title

GRANTEE: I, _____, certify that funds have been verified as available within the adopted budget and are authorized to be encumbered for this requisition.

Date

**Signature: Joseph Giebelhaus,
Town Supervisor & CFO**

FOR OFFICE USE ONLY

Purchase Order No.: _____

Approved Amount: \$ _____

Date Processed: _____