



Purchase Order Requisition/Expense Reimbursement Form

Description of Purchase/Items: _____

- Purchase Order: _____
- Expense Reimbursement
- Vendor Charge
- NVFD Debit Card

Payee Information: (Name): _____

(Address): _____

(Contact): _____

Funded By (Circle one): Town Budget Department Cadets Road Race Fundraising

Town Line Item to Charge:

- | | | | |
|----------------------------|-------------------------------|-----------------------------|-------------------------|
| 060 – Office Supplies | 420 - Truck Maintenance: S20 | 421 – Radio Maintenance | 480 – Gas/Diesel |
| 180 – Training | 420 - Truck Maintenance: E30 | 422 – New Equipment | 500 – Equipment Repairs |
| 300 – Dues/Subscriptions | 420 - Truck Maintenance: E40 | 424 – Replacement Equipment | 503 – Foam Class A |
| 320 – Building Maintenance | 420 - Truck Maintenance: B50 | 425 – Equipment Update | 680 – Hose Testing |
| 410 – Contracts | 420 - Truck Maintenance: U70 | 426 – Turnout Gear Update | 688 – Hose Replacement |
| 411 – Gear Maintenance | 420 - Truck Maintenance: E90 | 427 – Breathing Air System | |
| | 420 - Truck Maintenance: T100 | 431 – Janitorial Services | |

Other: _____

Total Amount: \$ _____

Submitted by: _____

Date: _____

Approved By: _____ **Title:** _____

Date: _____

Approved By: _____ **Title:** _____

Date: _____

**Attach any supportive documentation