



SCA, Inc. / Barony of South Downs
Purchase Request

- Non-Event** (Office & Admin)
- Event** (Additional Expenditures not included in Bid)
- Fundraising**

Date Requested: ___/___/___

Requesters Name _____ SCA Name: _____
(Mundane name)

Telephone: Home () _____ Work () _____

Mobile () _____ Email _____

If for event, which event? _____

Notes: _____

| | Item Description | #Units | Estimated Cost Each | Item total (unit x cost) |
|----|--|--------|---------------------|--------------------------|
| 1 | | | \$ | \$ |
| 2 | | | \$ | \$ |
| 3 | | | \$ | \$ |
| 4 | | | \$ | \$ |
| 5 | | | \$ | \$ |
| 6 | | | \$ | \$ |
| 7 | | | \$ | \$ |
| 8 | | | \$ | \$ |
| 9 | | | \$ | \$ |
| 10 | | | \$ | \$ |
| 11 | | | \$ | \$ |
| 12 | | | \$ | \$ |
| | Total Estimated Budget (Add Item Totals 1-12) | | | \$ |

TOTAL AMOUNT: \$ _____

REQUESTED BY: _____
(Mundane signature) (date)

AUTOCRAT APPROVAL: _____
(Applicable to event expenses) (date)

SENESCHAL APPROVAL: _____
(date)

EXCHEQUER APPROVAL: _____
(date)

| |
|---------------------------|
| Date of Baronial Vote: |
|---------------------------|

*Please submit this form to the Baronial Exchequer or Seneschal for Financial Committee review of expenditures. The populace of the Barony should be consulted for any expense greater than \$50.00.
 REV 12/9/21*