

REQUEST FOR PURCHASE

PO # (if known): _____ Date _____

Vendor Name: _____ Requested by: _____

Vendor Address: _____ Status of Order: _____

Phone #: _____

FAX #: _____

Contact Person: _____

ALWAYS ATTACH BACK-UP DOCUMENTATION FOR EACH REQUEST
(copy of order form, registration form, online registration printout, copy of catalog page, etc)

Quantity	Unit	Item #	Description	Price	Total
SUB-TOTAL					
SHIPPING					
TAX					
TOTAL					

Approval: _____ Budget Code: _____
Superintendent