PURCHASE REQUEST

DEPARTMENT: REQUESTED BY: DATE:		FUND: CODE:					
					VENDOR NAME		
							Vendor Catalog #
				Man			
			Sub Total				
			Discount				
	TEST WILL		Shipping/Handling				
ORDER MUST BE TOTAL TO CENTRAL OFFICE FO			Total	0.151.50			
Approved by	,	Superintendent	Date:				

THIS IS NOT A PURCHASE ORDER. This form is used to request purchases approval and an assigned purchase order number. Purchases should not be made until you receive a purchase order number from the Central office signed by the Superintendent.