

PURCHASE ORDER REQUISITION FORM

SCHOOL _____
 REQUESTOR & DEPARTMENT _____
 HOMESCHOOL PRINCIPAL _____
 ADDRESS _____
 CITY, STATE, ZIP _____

P.O. # _____
 REQUISITION # _____
 DESIRED DELIVERY DATE _____
 VENDOR CODE/# _____
 VENDOR PHONE _____
 VENDOR FAX _____

QTY	ITEM #	DESCRIPTION	UNIT COST	TOTAL
1				\$0.00
2				\$0.00
3				\$0.00
4				\$0.00
5				\$0.00
6				\$0.00
7				\$0.00
8				\$0.00
9				\$0.00
10				\$0.00
11				\$0.00
12				\$0.00
13				\$0.00
14				\$0.00
15	1	N/A	SHIPPING (TYPICALLY 10% OF TOTAL PURCHASE) REQUIRED ON ALL ORDERS	\$0.00
GRAND TOTAL				\$0.00

FINANCIAL CATEGORY _____
 REQUESTOR'S SIGNATURE _____
 APPROVED BY _____

UFARS CODE _____
 DATE _____
 DATE _____