

Circle One:

# SCHOOL REQUISITION

# BOARD REQUISITION

School Activity Acct \_\_\_\_\_

## 2023

### Cloverport Independent School District Purchase Requisition

Any purchases made without a signed purchase order will not be reimbursed to anyone.

VENDOR NAME: \_\_\_\_\_  
 STREET ADDRESS: \_\_\_\_\_  
 CITY/STATE/ZIP: \_\_\_\_\_  
 PHONE: \_\_\_\_\_

| Commodity Code: |           |             | Fixed Asset Y or N: |               |
|-----------------|-----------|-------------|---------------------|---------------|
| Quantity        | Catalog # | Description | Price/Unit          | Ext. Price    |
|                 |           |             |                     | \$ -          |
|                 |           |             |                     | \$ -          |
|                 |           |             |                     | \$ -          |
|                 |           |             |                     | \$ -          |
|                 |           |             |                     | \$ -          |
|                 |           |             |                     | \$ -          |
|                 |           |             |                     | \$ -          |
|                 |           |             |                     | \$ -          |
|                 |           |             |                     | \$ -          |
|                 |           |             |                     | \$ -          |
|                 |           |             |                     | \$ -          |
|                 |           |             |                     | \$ -          |
|                 |           |             |                     | \$ -          |
|                 |           |             |                     | \$ -          |
|                 |           |             | <b>Total</b>        | <b>\$0.00</b> |

**Requested By:** \_\_\_\_\_

**Date** \_\_\_\_\_

\_\_\_\_\_  
Program Coordinator for Fund 2 Purchases

\_\_\_\_\_  
Scott Adcock

\_\_\_\_\_  
Denise Smith, Finance Officer

\_\_\_\_\_  
Keith Haynes, Superintendent

MUNIS Code: \_\_\_\_\_ OBJECT: \_\_\_\_\_ Project: \_\_\_\_\_ \$ \_\_\_\_\_

MUNIS Code: \_\_\_\_\_ OBJECT: \_\_\_\_\_ Project: \_\_\_\_\_ \$ \_\_\_\_\_

MUNIS Code: \_\_\_\_\_ OBJECT: \_\_\_\_\_ Project: \_\_\_\_\_ \$ \_\_\_\_\_

Purchase Order #: \_\_\_\_\_

Date \_\_\_\_\_