



**A**ssociated

**S**tudent

**B**ody

# Requisition

(High School Use Only)

VENDOR/NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

DATE: \_\_\_\_\_

CLUB NAME: \_\_\_\_\_

CLUB ACCT: \_\_\_\_\_

**IF NEW VENDOR – PLEASE ATTACH W9 FORM**

**ESTIMATED COST**

QTY	DESCRIPTION	UNIT PRICE	LINE TOTAL

WHAT IS YOUR CURRENT CLUB BALANCE? \$ _____
ARE YOU EXPECTING INCOME? IF YES HOW MUCH? \$ _____
IS THIS A PRE-PAYMENT? <input type="checkbox"/> YES <input type="checkbox"/> NO
IS THIS A REIMBURSEMENT? <input type="checkbox"/> YES <input type="checkbox"/> NO

SUBTOTAL	_____
SALES TAX	_____
SHIPPING/FREIGHT	_____
TOTAL	_____

Approval:

\_\_\_\_\_  
(Club Advisor – MUST BE CERTIFICATED)

\_\_\_\_\_  
(Printed Name)

\_\_\_\_\_  
(Date)

\_\_\_\_\_  
(ASB Student Officer)

\_\_\_\_\_  
(Printed Name)

\_\_\_\_\_  
(Date)

\_\_\_\_\_  
(Site Administration)

\_\_\_\_\_  
(Printed Name)

\_\_\_\_\_  
(Date)

<i>Office Use Only</i>		
Purchase Order #: _____	Issued By: _____	Date: _____