FILL OUT FORM COMPLETELY, MAKE SURE ALL INFO IS UPDATED

- APPLY DISCOUNT, SHIPPING/HANDLING, IF APPLICABLE
- INCLUDE ITEM NUMBER, EMAIL AND FAX NO.
- CALCULATE TOTAL
- SUBMIT REQUISITIONS BEFORE REPAIRS ARE MADE
- RETURN "ORDER COMPLETE" FORM TO TOMMYE WHEN PURCHASE ORDER IS COMPLETE

REQUISITION FORM

VENDOR:	INSTRUCTOR:
CONTACT PERSON:	SCHOOL:
ADDRESS:	DATE PREPARED:
	VENDOR FAX #:
PHONE #:	EMAIL ADDRESS:

SELECT ONE:

	INSTRUCTIONAL SUPPLIES		**WORKSHOP**
	EQUIPMENT NEEDS-PROGRAM MAINTENANCE		**LOCAL TRAVEL**
	EQUIPMENT NEEDS-PROGRAM IMPROVEMENT		**OTHER** _____
	CREDENTIALS		

QTY.	ITEM #	DESCRIPTION	UNIT PRICE	TOTAL

SUB TOTAL:	$ -
SHIPPING:	
SALES TAX:	$ -
TOTAL:	$ -

IF APPLICABLE: SHIPPING MUST BE ENTERED
ALL ORDERS MUST INCLUDE 7% FOR TAX

SOURCE OF FUNDS:

_____014
_____017
_____740
FOR OFFICE USE ONLY _____Other

APPROVED BY:

_____
(Director)

_____
Date