

Eunice Public Schools

Athletics

Meal Request

1720 Ave K
 PO Box 129
 Eunice, NM 88231
 (575)394-2524
 (575)394-3006

Issued To:

Group
Date Submitted:
Date of Meal:
Authorized by:
Contact Name:

Description	Price
Meals for XXXXXX # of Students # Coach or Sponsor 1 Bus Driver # @\$15.00 X # of meals Total #	
Subtotal	\$ -
Tax rate	
Sales tax	\$ -
Other	
Total	\$ -

.....
Employee Signature

Date

Purchase order number must appear on all invoices and correspondence.