



Chavez Collegiate High School
Associated Student Body



PURCHASE REQUISITION FORM

1. Attach completed CLUB meeting minutes form to this requisition.
2. Advisor/coach signature and Treasurer's signature must be on this form.
3. Attach backup or quote to each requisition.
4. Requisition will be processed ASAP from date of ASB Executive council approval - allow at least 5 days for POs and 2 weeks for checks.
5. Purchase Order copy will be emailed to advisor/coach from District Office when ready.

CLUB/ORGANIZATION: _____ ACCOUNT #: _____ DATE: _____

PURPOSE: _____ Date Activity will take place: _____

TO: _____

ADDRESS: _____

CITY, ST, ZIP: _____

PHONE #: _____

FAX # OR
E-MAIL

PLEASE NOTE:

The Vendor PO copy will be mailed
UNLESS told otherwise

- ☐ Return PO to Club to place order
- ☐ Pre-Pay (Mail Check to Vendor)
- ☐ Return check to Club
- ☐ E-MAIL
- ☐ OTHER _____

Quantity	DESCRIPTION (Please be specific)	UNIT PRICE	TOTAL
 NEVER ORDER OR PURCHASE A PRODUCT WITHOUT FIRST OBTAINING A PURCHASE ORDER!		SUB-TOTAL	
		TAX	
		Shipping & Handling	
		TOTAL	

Advisor/Coach Signature (x) _____ Date _____

Phone# Advisor/Coach _____ (Please provide a contact number)

Club Treasurer (or designee) Signature (x) _____ Date _____

Administrator (x) _____ Date _____

ASB OFFICE USE ONLY

ASB Treasurer _____ Purchase Order # _____

Director of Activities _____ Date: _____