

FISCAL YEAR _____

PURCHASE REQUEST

PR# _____
(Purchasing Will Assign - Leave Blank)

PO # _____
(Purchasing Will Assign - Leave Blank)

Requisition Codes: _____

Vendor ID: _____
(If Known, Will Pre-Fill Vendor Name & Address)

Buyer: _____

Entry Date: _____ Terms: _____

Bid #: _____ Contract #: _____

Suggested Vendor Name or TBD (To be determined):

Address: _____

City/State/Zip: _____

Phone: _____

Categorical Funding: Yes _____ No _____

School: _____ Site: _____

Justification: _____

Categorical Approval

Research Justification for Staff Development

Approved Categorical Services: _____

Ship To: **S72** _____
S72 000 or XXX (Site Number)

End Use: _____
RM #/AREA (Bookstore, Library) Limit: 19 Characters

Location: _____
School/Site Name

Date Required: _____
Requested Delivery Date (MM/DD/YY)

Requested By: _____ Date: _____
Person/Department Requesting Order Date Requested (MM/DD/YY)

Approved By: _____ Date: _____
Authorizing Signature(s)/Principal or District Dept. Head Date Approved (MM/DD/YY)

ITEM #	QTY	UNITS	PRODUCT I.D. DISTRICT Non-Stock #	DESCRIPTION & MFG. CATALOG #	UNIT PRICE	ACCOUNT (BUDGET) PSEUDO-OBJECT	MANAGER #
			72.XXXXX		(Not Total)	XXXXXXXX - XXXX	XXXX
01			72.				
02			72.				
03			72.				
04			72.				
05			72.				

CONTINUED TO PAGE 2 Purchase Request Items, CHECK HERE: []

White - Purchasing Dept.
 Yellow - Confirmation
 Pink - Originator Copy

Subtotal of Req: _____
 Tax & Shipping (18%) _____
 Total Value of Req: _____