

Rescind

ADMINISTRATION

02.4242 AP.21

Expenditure of Funds/Purchase Requisition Form

Requisition for SBDM (Instructional) Purchasing Only	School _____	Date: _____ P.O. #: _____ Dept./Program: _____
Vendor: _____ Address: _____ _____ Ship to: _____ Attention: _____ Address: _____ _____		This vendor was chosen from: _____ State Bid List: _____ Price Contracts: # _____ Consortium: _____ Bidding Procedure: _____ Specialty Item: _____ Emergency: _____ Other: _____

Quantity	Item Code	Description/Supply Source, if Known	Unit Price	Total Cost

Gross Total: _____
Less _____ % discount
Transportation: _____
Total Net Cost: _____

P.O. Authorized by: _____ Title: _____
Name

Review/Revised:8/18/1997