## PURCHASE ORDER REQUEST GENERAL FUND

Please provide the following information:		ormation: PC	PO Request No			
Vendor NameAddress			PTSA Grant Dept. Budget Name			
Fax #			D Ol Y			
Phone #			Person Ordering Items			
Items to k	oe ordered, including th	ne following inform	nation:			
Quantity	Catalogue/Cart #	Description		Price/Item	Total	
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SPECIAL	 INSTRUCTIONS:					
	morkociions.				~3~~~~	
			Su	ıh-Total		
810777			Sub-Total			
Account Code: 0127330018			Shipping			
			Su	b-Total		
Signature of Department Head			Sales Tax	@ 9.9%		
			Gra	nd Total		
Departme	ent Head		Gia			

## PURCHASE ORDER REQUEST GENERAL FUND

Please provide the following information:  Vendor Name Address			PO Request No  PISA GYUNH  Dept. Budget Name			
Phone #			Person Ordering Items			
Items to b	oe ordered, including t	he following inform	ation:			
Quantity	Catalogue/Cart #	Description	Price/Item	Total		
•						
SPECIAL I	INSTRUCTIONS:		*			
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-		<u> </u>				
			Sub-Total			
Account Code: 0127330018			_ ≯ Shipping			
	, , , , , , , , , , , , , , , , , , ,					
			Sub-Total			
Signature	of Department Head	*	Sales Tax @ 9.9 %			
Department Head  * Must fee a			Grand Total			
			include all shipping, installation, service nd 9.9% sales tox even if it isn't on Tinte or invoice.			