



## CTE/STEM PURCHASE ORDER PRE-APPROVAL REQUEST

Requested by: \_\_\_\_\_

Date: \_\_\_\_\_

Vendor:	Ship to:
Address:	Attention:
City, State:	Address:
Phone:	City, State:
Fax:	

### Reason for Purchase:

Purchase Order Request: ☐

Credit Card Order Request: ☐

<u>ITEM &amp; ISBN</u>	<u>DESCRIPTION</u>	<u>PRICE</u>	<u>Qty.</u>	<u>Total</u>

Subtotal: \$

S & H

Tax 9.2%

**Total Request: \$**

\_\_\_\_\_  
(Signature of Requestor)

### Budget Authorization:

\_\_\_\_\_  
(Carl. L. Fender, CTE Director)

\_\_\_\_\_  
(Date)

**Budget Code:** \_\_\_\_\_

**RETURN AUTHORIZED REQUEST TO Diane Storm. THANK YOU!**