

REQUISITION AND PURCHASE ORDER

NAME OF SCHOOL _____

ADDRESS _____

PURCHASE FROM _____

DATE _____

OFFICE ONLY	
	NO. _____
DATE _____	
ACCOUNT _____	

QUANTITY	ARTICLE/DESCRIPTION	UNIT	UNIT PRICE	AMOUNT

SUB TOTAL	
SHIPPING/HANDLING	
TOTAL	

APPROVED BY:	_____
APPROVAL DATE:	_____
CHECK NO.:	_____
DATE OF PMT:	_____

REQUESTED BY: _____
APPROVED BY: _____

CENTRAL OFFICE ONLY:	
APPROVED BY: _____	DATE: _____

IF \$2,000.00 TO \$9,999.99, SUPERINTENDENT/DESIGNEE MUST APPROVE.

IF \$10,000.00 AND OVER, EVANGELINE PARISH SCHOOL BOARD MUST APPROVE.