

Circle One:

SCHOOL REQUISITION

BOARD REQUISITION

2019

Cloverport Independent School District Purchase Requisition

Any purchases made without a signed purchase order will not be reimbursed to anyone.

VENDOR NAME: _____
 STREET ADDRESS: _____
 CITY/STATE/ZIP: _____
 PHONE: _____

Commodity Code:		Fixed Asset Y or N:		
Quantity	Catalog #	Description	Price/Unit	Ext. Price
				\$ -
				\$ -
				\$ -
				\$ -
				\$ -
				\$ -
				\$ -
				\$ -
				\$ -
				\$ -
				\$ -
				\$ -
				\$ -
				\$ -
				\$ -
Total				\$0.00

Requested By: _____

Date _____

Program Coordinator for Fund 2 Purchases

Authorized Administrator

Denise Smith, Finance Officer

Keith Haynes, Superintendent

MUNIS Code: _____ OBJECT: _____ Project: _____ \$ _____

MUNIS Code: _____ OBJECT: _____ Project: _____ \$ _____

MUNIS Code: _____ OBJECT: _____ Project: _____ \$ _____

Purchase Order #: _____

Date _____