

Southern Wells Community Schools

**REQUISITION FORM**

**INSTRUCTIONS:** Please provide complete information. This information will be used in the inputting of your request. Once the information is processed, the request will either be approved or denied. A purchase order will be generated from an approved request.

VENDOR NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

STREET: \_\_\_\_\_

CITY: \_\_\_\_\_ ST: \_\_\_\_\_ ZIP: \_\_\_\_\_

PHONE: (\_\_\_\_) \_\_\_\_\_ FAX: (\_\_\_\_) \_\_\_\_\_ Vendor # \_\_\_\_\_

TOTAL of Order: \_\_\_\_\_ Requisition Date: \_\_\_\_\_

- SHIP TO: \_\_\_ Central Office (1)  
 \_\_\_ Jr/Sr High School (2)  
 \_\_\_ Elementary (3)  
 \_\_\_ Maintenance (4)  
 \_\_\_ Bus Garage (5)

REFERENCE (Reason Needed:)  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

ARRIVE BY: \_\_\_ Regular Means  
 \_\_\_ UPS \_\_\_ Air

Department: \_\_\_\_\_  
 Attention: \_\_\_\_\_

<u>Fund</u>	<u>Program</u>	<u>Object</u>	<u>CC</u>	<u>Description</u>	<u>Q</u> <u>v</u>	<u>Uni</u> <u>t</u>	<u>Unit/</u> <u>Pric</u> <u>e</u>	<b><u>Sub-Tot</u></b> <b><u>al</u></b>
				<b>REQUISITION TOTAL</b>				<b>\$</b>

Staff Member Signature \_\_\_\_\_ Date: \_\_\_\_\_

Forwarded to Central Office \_\_\_\_\_ Date: \_\_\_\_\_

Requested Denied \_\_\_\_\_ Date: \_\_\_\_\_