

# Purchase Order

## Requestor Information:

Date of Request:

Requested By:

Location:

School:

Department or Program:

Grade Level:

Room Number:

Local Code:

Program Code:

OPTAR Code:

Object Class:

## Vendor Information:

Company

Address

City  State  Zip Code

Phone Number

FAX Number

Contact Name

Email Address

Website

Order Date

Cardholder

## Justification For Purchase:

Item Number	Description	Quantity	Unit Price	Amount

**Comments:**

**Sub-total**

**S & H**

**Grand Total**

**Authorized By:**

DATE APPROVED

Approving Official Signature

**REQUESTED BY:**

Requestor Signature/ Date

**RECEIVED BY:**

Requestor Receiving Signature / Date

