

Brookings-Harbor School District 17C

"Every Student Can Succeed"

REQUISITION

A request for supplies/services/repair/equipment

Please fill out completely using BLACK or BLUE Ink.

Please refer to the Instruction Sheet for Filling out Requisitions

Requisition# _____

PO# _____

Date: 1 JULY 2016

Requestor: _____

Bldg/Dept: _____

Principal/Supervisors Approval: _____

Vendor: _____

Address: _____

City/State/Zip: _____ Contact Name: _____

School Year
2016-17

| QTY | ITEM # | DESCRIPTION | Unit Price | TOTAL |
|----------------|--------|-------------|------------|--------|
| | | | | \$0.00 |
| | | | | \$0.00 |
| | | | | \$0.00 |
| | | | | \$0.00 |
| | | | | \$0.00 |
| | | | | \$0.00 |
| | | | | \$0.00 |
| | | | | \$0.00 |
| | | | | \$0.00 |
| | | | | \$0.00 |
| Shipping Costs | | | | |
| Total | | | | \$0.00 |

| FUND | FUNCTION | OBJECT | LOCATION | AREA | COMMENTS |
|------|----------|--------|----------|------|----------|
| | | | | | |
| | | | | | |
| | | | | | |