

Canyons School District
Request For Materials or Parts From Supplier

School _____

Purchase Order # _____

Fund	Type	LOC	Program	Function	Object
	E				

Date Ordered _____

Work Order # _____

** = In Stock

WS = Will Ship on this date _____

WC = Will Call on this date _____

Vendor will call when available

Sole source vendor?

Yes No

Reason: _____

Contracted Service

	1	2	3
Vendor			
Address			
Phone			
Quoted by:			
When:			
Terms			

Qty	U/M	Item Description	Unit Cost	Ext.	Unit Cost	Ext.	Unit Cost	Ext.
Added Info.			Total Quote					

List where or on what equipment materials are to be used:

Requested by: _____

Date : _____

Approved by Leadman: _____

Date : _____

Director Approval: _____

Date : _____

Comments : _____
