

Request to Purchase

Swanton Local Schools

(THIS IS A REQUEST NOT A PURCHASE ORDER)

Date: _____ Building/Group: _____ Requestor: _____

Instructions: List below the items you desire to purchase. Give a complete description of the materials, including sizes, quantity, publisher (if books), catalog references, etc. If you want us to place the order on your behalf, please complete special instructions section below. If you have a multi vendor in place, complete this form and fill in PO# in special instructions box. If you need more lines then provided use backside to add lines.

VENDOR: _____

RETURN THIS FORM TO YOUR BUILDING PRINCIPAL AND/OR SUPERVISOR FOR APPROVAL.

Special Instructions (check if applicable):	
<input type="radio"/>	Please Fax/Send in this order for me:
	Fax# : (____) _____
<input type="radio"/>	Multi-Vendor Purchase Order already in place:
	PO#: _____

Quantity	Item No. & Description	Unit Price	Total
Total of front page:			
****Continued on backside (check one): <input type="checkbox"/> Yes <input type="checkbox"/> No			

Appropriation Line Item Number:
 (If this line is not complete, request will not be approved)

(Office Use Only)	
Treasurer's Initials:	
____ Request Approved	____ Request Not Approved (See attached Reasons)
Superintendent's Initials:	
____ Request Approved	____ Request Not Approved

Principal/Supervisor Authorization:

(By signing this you are approving the request to purchase the items and you have confirmed you have the appropriations available to purchase.)

Authorization: _____ Date: _____

DO NOT ORDER ANYTHING LISTED ON THIS FORM UNTIL YOU RECEIVE A PURCHASE ORDER NUMBER BACK FROM THE TREASURER'S OFFICE. THIS PROCESS MAY TAKE 3-5 BUSINESS DAYS FROM RECEIPT INTO TREASURER'S OFFICE. PLEASE PLAN ACCORDINGLY. ANY UNAUTHORIZED PURCHASES WILL RESULT IN REQUESTOR PAYING FOR ITEMS PERSONALLY.