2018 - 2019

ACTIVITY FUND - REQUISITION REQUEST

USE THIS FORM FOR ACTIVITY FUND PURCHASES ONLY *: Deliver completed form to the Business Office. Once approved, an Activity Fund PO Number will be assigned and the form will be returned to you to place your order. When your order is received, mark "RECEIVED", date & initial and return to the Business Office for payment. PLEASE ATTACH INVOICE AND ALL SUPPORTING INFO.*

ACTIVITY FUND PO NUMBER *(Business Office)* **:**

VENDOR NAME: _____

ADDRESS: _____

_____

DATE: _____

ORDER REASON: _____

_____

PURCHASE TO BE MADE FROM WHAT ACTIVITY FUND: _____

QUANTITY	*DESCRIPTION*	*UNIT PRICE*	*Total*
		Grand Total:	

Requestor signature: _____

Campus Principal Approval: _____

Business Mgr. Approval: _____

SHIP TO:	**WEIMAR ISD**	**BILL TO:**	**WEIMAR ISD**
	ATTN: _____		**ATTN: ACCOUNTS PAYABLE**
	506 W. MAIN		**506 W. MAIN**
	WEIMAR TX 78962		**WEIMAR TX 78962**

PHONE (979) 725-6300 * FAX (979) 725-8737

NO BACK ORDERS ACCEPTED AFTER 60 DAYS * STATE SALES TAX NO. 746002543