

Magnolia High School Requisition

PO#

Date

Vendor Name

Contact Person @ Vendor location when applicable**Address (Street, PO Box, etc.)**

Additional Address

City, State, & Zip

Person Requisitioning

Ph. # person requisitioning**School Account Name and/or #****Vendor Fax #**

Vendor Phone #

| Description (Item #, Model #, Color, Size, etc.) | Qty. | Price Each | Total |
|--|-----------------|---------------|-------|
| <p align="center">* * * 5 THINGS REQUIRED BEFORE PRINCIPAL APPROVAL * * *</p> <p align="center">VENDOR NAME AND ADDRESS</p> <p align="center">QUANTITIES AND \$ AMOUNT BELOW AND SCHOOL ACCOUNT OR # ABOVE RIGHT</p> | | | |
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| <u>Notes/Special Instructions:</u> | Subtotal | | \$ - |
| | Shipping | | |
| | TOTAL: | | \$ - |
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Principal

Date _____