Darson Making Da	Data							
Person Making Re	erson Making Request			<u>Date</u>				
Building (circle one	e) <u> </u>	District	Northview		Parkside			
Grade Level/Depa	rtment/Activit	у						
Credit Card -	Dist MC	PS MC	NV MC	HyVee	Staples	W	'alMart	
Vendor Name				Vendor C	harge	yes	no	
Vendor Full Addre	ss							
Website (if applica	ıble)							
Phone			Fax					
✓ All orders will	be placed by	the Distric	ct Office af	ter approv	al			
✓ Please comple ✓ All orders will ✓ All receipts for Quantity	be placed <u>by</u> r Credit Card	the Distric	<u>ct Office</u> af s must be s	ter approv	al	cipal':		
✓ All orders will ✓ All receipts for	be placed <u>by</u> r Credit Card	the District purchases	<u>ct Office</u> af s must be s	ter approv	al to the prin	cipal':	s office	
✓ All orders will ✓ All receipts for	be placed <u>by</u> r Credit Card	the District purchases	<u>ct Office</u> af s must be s	ter approv	al to the prin	cipal':	s office	
✓ All orders will ✓ All receipts for	be placed <u>by</u> r Credit Card	the District purchases	<u>ct Office</u> af s must be s	ter approv	al to the prin	cipal':	s office	
✓ All orders will ✓ All receipts for	be placed <u>by</u> r Credit Card	the District purchases	<u>ct Office</u> af s must be s	ter approv	al to the prin	cipal':	s office	
✓ All orders will ✓ All receipts for	be placed <u>by</u> r Credit Card	the District purchases	<u>ct Office</u> af s must be s	ter approv	al to the prin	cipal':	s office	
✓ All orders will ✓ All receipts for	be placed <u>by</u> r Credit Card	the District purchases	<u>ct Office</u> af s must be s	ter approv	al to the prin	cipal':	s office	

		Total Order Price				
Principal's Signati	ure	Date	Superintendent's S	ignature	Date	
PO #					Updated	8-1-19

Shipping Cost