LENAWEE INTERMEDIATE SCHOOL DISTRICT

PURCHASE REQUISITION

Date: _____ P.O. Number _____

Requisitioned by: _____ Date Sent: _____

Attention of: _____ Account Number: _____

Brief Rationale:

Name of Supplier: _____

Address: _____
(street) (state) (zip)

_____

Quantity	Unit	Catalog Page No.	Description	Unit Price	Total Price

Ship To: _____

Address: _____

Attention: _____ Approved by: _____

_____

WHITE — Originator YELLOW — Divisional Copy PINK — Business Office