

# Tucker County Schools

## Requisition Form

Requisition # \_\_\_\_\_

P. O.# \_\_\_\_\_

Vendor # \_\_\_\_\_

### Vendor Information:

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City, St, Zip: \_\_\_\_\_

Phone: \_\_\_\_\_

Email/Fax: \_\_\_\_\_

### Requestor Information:

Requested by: \_\_\_\_\_

Location: \_\_\_\_\_

Date: \_\_\_\_\_

Purpose: \_\_\_\_\_

Funding Source: \_\_\_\_\_

Quantity	Item Number	Description	Unit Price	Total
<b>Shipping</b>				
<b>TOTAL</b>				

Requestor Signature \_\_\_\_\_

Date \_\_\_\_\_

Principal/Director Approval \_\_\_\_\_

Date \_\_\_\_\_

Superintendent Approval \_\_\_\_\_

Date \_\_\_\_\_

FINANCE USE ONLY

Account Code	Amount	Budget Mgr Approval	Date
_____	_____	Ent'd	Created
_____	_____	_____	_____
_____	_____	_____	_____