

WEST SONOMA COUNTY HIGH SCHOOL DISTRICT THIS IS NOT A PURCHASE ORDER OR DISTRICT CONTRACT

VENDOR NO. _____

V E N D O R	_____	S H I P T O	_____	Analy High School	_____
	Phone _____		Address	6950 Analy Avenue	
	FAX _____		City/State	Sebastopol, CA 95472	
			Attn		
			Phone _____		

REQUISITION	
NO.	_____
DATE	_____

ITEM	QUANTITY	UNIT OF MEASURE	DESCRIPTION	UNIT PRICE	COST EXTENSION			
1								
2								
3								
4								
5								
6								
7								
8								
SPECIAL INSTRUCTIONS			Technology Item? YES NO Tech OK _____	SUBTOTAL				
				TAX				
				S/H				
				TOTAL				
BUDGET CLASSIFICATION								
ITEM	FD	RES	GOAL	FUNC	OBJ	SCH	MGMT	AMT ENCUMB

INSTRUCTIONS TO PO REQUESTORS

- 1 Provide complete vendor address
- 2 Tax all items @ 9.00%
- 3 **Add 15% shipping** unless vendor specified another rate
- 4 Provide 16-digit account code
- 5 Site the specific goal/objective met by the use of any categorical funds and all categorical requisitions must be forwarded to Curriculum

Requestor _____
 Date _____
 Project _____

_____	_____	_____
AUTHORIZED SIGNER	TITLE	DATE
_____	_____	_____
AUTHORIZED SIGNER	TITLE	DATE