GRANDVIEW INDEPENDENT SCHOOL DISTRICT
PO Box 310, Grandview, Texas 76050

Purchase Requisition

Vendor: _____ Date_____
_____
_____ Req Number_____
_____

Prepared by _____ *For Administration Use Only*

Principal Signature _____ PO Number_____

Superintendent Approval _____ Ordered_____

Requested for: _____

Explanation of need: _____

Qty	Page	Number	Description	Unit Price	Discount	Total
				Subtotal		$
				Shipping/handling		$
				Total amount		$

All items requested are to be turned in on a purchase requisition to the building principal. Upon his/her recommendation and superintendent approval, the items will be ordered. The requisition will be returned to the teacher to keep and check off the items as they are received. When all items have been received, please return the requisition to the office so that the school board can approve payment.