

Purchase Order

Sample Purchase Order

School Name
School Address
City, State, ZIP

P.O. Number: _____ Date: _____

To:

Vendor Name
Vendor Address

Item Number	Description	Quantity	Unit Price	Total Amount
Requested By: _____ (Name of Person) (Name of Club)		Subtotal		
		+ estimated sales tax:		
		+ estimated shipping charges:		
		Total of this purchase order:		

Notice to the Vendor

Please mail the invoice to the address at the top of the purchase order, care of the ASB Bookkeeper.
 Please indicate the purchase order number on the invoice. If all below signatures have not been obtained, this purchase order is not valid.

Accounts to be Charged (this section must be completed prior to submittal to the ASB bookkeeper)

Club or Class: _____

Club Account(s) to be Charged: _____

Certification

Submitted and Approved by:

Student Club Representative: _____
Signature, Title and Date

We certify that this request has been approved by ASB or Student Council:

Club Advisor: _____
Signature, Title and Date

Principal/School Administrator: _____
Signature, Title and Date

Verified by ASB Bookkeeper: _____
Signature, Title and Date

Recorded in ASB Student Council Minutes on: _____
Date