Requisition Form 2023

Pryor Public Schools
Billing Address: *P.O. Box 229; Pryor, MT 59066*
Physical/Shipping Address: *1 High School Lane; Pryor, MT 59066*
Telephone: *406-259-7329* Fax: *406-245-8938*

This form is for a staff member to request materials, supplies, equipment, services etc. This Requisition form MUST be approved before a purchase can be made. If you are ordering from more than one vendor, use one form per vendor.

PLEASE FILL OUT ITEMS 1-6.

1. Name of Staff completing this requisition:

Name _____ **Date**

2. Vendor Information *(all spaces must be filled in)*

Name _____
Address _____
Address _____
City/State/Zip _____
Telephone _____

3. Requesting: *(please check one)*

□ **Purchase Order** □ **Check** □ **Reimbursement** □ **Credit Card**

4. Purchase will be used for the following department: *(please check one)*

□ **High School** □ **Jr High** □ **Elementary** □ **District**

5. Purpose of Purchase: *(please check all that apply)*

□ **classroom supplies** □ **instructional material** □ **equipment** □ **services** □ **dept. supplies**

□ **fee/dues** □ **other:**

6. Credit Card used _____

7. Items requested to be purchased: ***(please attach all verifing documentation)***

Item Number	Qty	Item Description	Unit cost

If more space is needed, please use the back of this form.

Subtotal
Subtotal from back page
Estimated tax/Shipping/Handling/etc.
TOTAL COST

ALL ORDERING INFORMATION MUST BE PROVIDED BEFORE APPROVAL WILL BE CONSIDERED

****Please forward to the Budget Manager's Office****

□ Approved □ Disapproved

Principal's Signature:_____ Date:_____

□ Approved □ Disapproved

Superintendent's Signature:_____ Date:_____

Accounting Code(s) _____

□ CL #_____ □ PO#_____ □ Check#_____ □ Credit Card#_____

-2024

Requisition Form 2022-2023

Item Number	Qty	Item Description	Unit cost	Total

STUDENT ACTIVITIES - Requisition Form 2022-2023

Pryor Public Schools

Billing Address: *P.O. Box 229; Pryor, MT 59066*

Physical/Shipping Addres: *1 High School Lane; Pryor, MT 59066*

Telephone: *406-259-7329* Fax: *406-245-8938*

This form is for a **class or club sponsor** to request materials, supplies, equipment, services etc. from monies already earned. This requisition form MUST be approved before any purchases can be made. a purchase order can be created. If ordering from more than one vendor, use one form per vendor.

PLEASE FILL OUT ITEMS 1-6.

1. Name of Class or Club Sponsor completing this requisition:

Name _____ Date _____

2. Vendor Information *(all spaces must be filled in)*

Name _____

Address _____

City/State/Zip _____

Telephone _____

Email/Website Address _____

3. Requesting: *(please check one)*

□ **Purchase Order** □ **Check** □ **Reimbursement** □ **Credit Card**

4. Purchase will be charged to: *(please check one)*

□ **Club:**_____ □ **Class:**_____

5. Purpose of Purchase: *(attach all supporting documentation: bids, quotes, etc.)*

□ _____ □ _____

6. Items requested to be purchased:

Item Number	Qty	Item description	Unit cost	Total
			Subtotal	
			Estimated tax/Shipping/Handling/etc.	
			TOTAL COST	

ALL ORDERING INFORMATION MUST BE PROVIDED BEFORE APPROVAL WILL BE CONSIDERED

****Please forward to the Budget Manager's Office****

□ Approved □ Disapproved

Principal's Signature:_____ Date:_____

□ Approved □ Disapproved

Superintendent's Signature:_____ Date:_____

□ PO#_____ □ Check#_____ □ Credit Card#_____