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