

# Iditarod Area School District PURCHASE REQUISITION FORM

VENDOR: \_\_\_\_\_  
ADDRESS: \_\_\_\_\_  
\_\_\_\_\_

SHIP TO \_\_\_\_\_  
\_\_\_\_\_

Catalog Date (if any) \_\_\_\_\_

SHIP VIA \_\_\_\_\_

DATE 3/16/16

ACCOUNT CODE \_\_\_\_\_

ORIGINATED BY \_\_\_\_\_

APPROVED BY \_\_\_\_\_

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QTY	STOCK NO.	ITEM DESCRIPTION	UNIT PRICE	TOTAL
				\$ -
				0.00
				0.00
				0.00
				0.00
				0.00
				0.00
				0.00
				0.00
				0.00
				0.00
				0.00
				0.00
				0.00
				0.00
				0.00
				0.00
				0.00
				0.00
				0.00
				0.00
				0.00
				0.00

SUB TOTAL \$ -

POSTAGE/FREIGHT \_\_\_\_\_

GRAND TOTAL \$ -