

SOUTH WASCO COUNTY SCHOOL DISTRICT #1

699 Fourth Street
 P.O. Box 346
 Maupin, OR 97037



Web Site: www.swasco.net
 Phone: 541-395-2645
 Fax: 541-395-2679

VENDOR: _____
Address: _____

PURCHASE ORDER NO. _____

Date _____

Phone Number: _____

Ordered by _____

Fax Number: _____

Account Number: _____

Bill to: S. Wasco County School District #1
 Accounts Payable
 P.O. Box 346
 Maupin, OR 97037

Shipping and Billing Instructions:

- ◆ Enclose packing slip with order.
- ◆ Mark all packing slips, invoices and packages with purchase order number.
- ◆ Invoice in duplicate, completely itemized.
- ◆ We require all MSDS sheets and labels be sent with all shipments of hazardous chemicals.

Ship to:

<input type="checkbox"/> Maupin Grade School Attn. Secretary 308 Deschutes Avenue P.O. Box 346 Maupin, OR 97037	<input type="checkbox"/> S. Wasco County High School Attn. Secretary 699 4th Street P.O. Box 347 Maupin, OR 97037	<input type="checkbox"/> S. Wasco Co. School Dist. #1 Attn. Adm. Secretary 699 4th Street P.O. Box 346 Maupin, OR 97037
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VALID ONLY WHEN NUMBERED, DATED, AND SIGNED

Quantity	Catalog No.	Page #	Description	Unit Price	Total

 Principal / Supervisor / Deputy Clerk

BUDGET CODE

□□□-□□□□-□□□□-□□□-□□□

 Superintendent

White Copy: Vendor Yellow Copy: District Office
 Pink Copy: Bldg. Secretary

For Office Use Only—	Date Ordered: _____	by: _____	Date Received: _____	OK to Pay by: _____
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