**LOCAL SCHOOL PURCHASE ORDER**

**Purchase Order #_____**

**Vendor:**

Phone:
Fax:

**Bill To and Ship To:**

| Quantity | Item Number | Description | Unit Price | Total |
|---|---|---|---|---|
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| | | | **Sub Total** | |
| | | | **Shipping** | |
| | | | **Total** | |

| Category | Amount |
|---|---|
| | |
| | |
| | |

**Requested By** **Date**

**Approved by** **Date**

**Revised: 7/1/17**