



HABERSHAM COUNTY SCHOOL DISTRICT

Request for County Funds

Reason for Request:

BOE Check: _____

Journal Entry: _____

Purchase Order: _____

Requisition # _____

(Admin use Only)

Vendor Name & Address:	Ship To Facility Name & Address:

Quantity	Item Number	Description	Unit Price	Total
Special Instructions:			Sub Total	
			Shipping	
			Total	

Budget Code: Fund-Year-Function-Object-Program-Facility	Note/Comment	Amount

Requested By _____ Date _____

Approved by _____ Date _____