American Fork Jr High
Request to Purchase

Requesting Teacher _____

Vendor Name _____

Address _____

City _____ State _____ Zip _____

Phone Number _____

Account Name to be billed _____

Date: _____

_____
Admin Signature over account

Quantity	Item Number	Item Description	Unit Price	Total Price
				$ 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
			Shipping/Handling	
			Total Cost	$ 0.00

Instructions (for Leslie)	
Credit Card #	Notes:
Fax #	
Check Required (date when)	
Bid Sheet Needed Yes No	
New Vendor Yes No	
Reimbursement (see reimbursement form)	

Single Item over $1000?	Bid Sheet required
Total Request over $5000?	Bid Sheet required
Total Request over $10000?	must go thru purchasing

Updated August 2015