COPESD
FINANCE DEPARTMENT

PURCHASE ORDER REQUEST FORM

Revised August 2024

ACCOUNT #: _____ **COST:** _____

ACCOUNT #: _____ **COST:** _____

ACCOUNT #: _____ **COST:** _____

QUANTITY	ITEM #	ITEM DESCRIPTION	COST PER ITEM	TOTAL COST
				$ 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
			SUBTOTAL	$ 0.00
			SHIPPING	
			ESTIMATED TOTAL	$ 0.00

VENDOR INFORMATION:

_____

_____

_____

_____

_____

DATE: _____

REQUESTED BY: _____

APPROVED BY: _____

FOR AMAZON & ALL ONLINE ORDERS, PLEASE SUBMIT A WISH LIST OR WEBSITE LINK TO YOUR SUPERVISOR WITH THIS ORDER FORM