

Date P-Card number

Vendor Code

Contact/Phone

Building budget

Teacher name

Special instructions:

Qty	Units	Item #	Description	Unit price	Total	Account code

Subtotal

Tax

Shipping

Misc. charge

Total cost

Activity Rep. (signature) _____

Activity Adv. (signature) _____

ASB Rep. (signature) _____

Primary Adv. (signature) _____

Date

Date

Date

Date