

ARLINGTON HIGH SCHOOL
 2951 Jackson Street
 Riverside, CA 92503
 www.rusdlink.org/Arlington
 P: 951-352-8316
 F: 951-352-8417

Submit Date: _____
 Club Meeting Date with Minutes: _____

Requisition No: _____
 PO #: _____



PURCHASE ORDER REQUEST

<i>Payable To:</i>
Name: _____
Address: _____
City/State/Zip: _____
Phone: _____

<i>Club Responsible for Payment:</i>
Club: _____
Account Number: _____
Requisitioner: _____

Qty	Units	Description	Unit Price	Total

<p>Minutes must be attached for approval.</p> <p><i>Any Open POs will require 1) detailed explanation of what will be purchased and 2) Warrant Request for payment with receipts</i></p>	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr><td>Subtotal</td></tr> <tr><td>Shipping & Handling</td></tr> <tr><td>Taxes (8%)</td></tr> <tr><td>TOTAL</td></tr> </table>	Subtotal	Shipping & Handling	Taxes (8%)	TOTAL
Subtotal					
Shipping & Handling					
Taxes (8%)					
TOTAL					

<i>Purpose of PO</i>	
	Supplies
	Activities
	Fundraiser <i>(Fundraiser Request and Revenue Potential Required)</i>

<i>Check One</i>	
	Return PO Form to _____ by _____
	Return CHECK to _____ by _____
	Mail CHECK to address above.

<i>Approval Signatures</i>	
<i>All Signatures are REQUIRED before any money may be spent. Notification will be provided when approval is fully granted.</i>	
Signature: _____ <div style="text-align: center;">Organization Treasurer</div>	Signature: _____ <div style="text-align: center;">ASB Treasurer</div>
Signature: _____ <div style="text-align: center;">Organization Faculty Advisor</div>	Signature: _____ <div style="text-align: center;">Director of Activities</div>
ASB Minutes Date: _____	Signature: _____ <div style="text-align: center;">Assistant Principal</div>