INDEPENDENT SCHOOL DISTRICT #317
DEER RIVER, MINNESOTA

School Year:

Date Requisitioned:

Requisitioned by:

Department:

Course:

Office Use Only

Purchase Order # _____

Fixed Asset Tag# _____

Date _____

Vendor # _____

Approved by _____

Date: _____

Fax # if order can be faxed

Order From _____ (Company Name)

Quantity	Catalog Number	Item Name	Unit Cost	Total	Fixed Asset "X" if tracking