



PALMERTON AREA SCHOOL DISTRICT

PURCHASE REQUEST

Vendor Information	
Company:	
Address:	
Phone#: ()	Fax# ()

Request Information	
Requested By:	
Date:	Approved By:
Budget Information	
Department:	
Budget Code:	School Year:

Quantity	Item #	Description	Page #	Unit Price	Total

(Please highlight your priority items)

TO AVOID DELAYS: Please provide accurate pricing. Precise figures are obtained by utilizing current catalogs or online pricing.

Subtotal:	\$
Shipping: If unknown, use 10% (Minimum \$5)	\$
Total:	\$