



**Bonner Springs-Edwardsville
USD 204 Purchase Requisition**

Date: _____

Requested by: _____

Dept: _____

	QTY	Detailed Description and Catalog # (if known)	Unit Cost	Total Cost	Funding Source
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					
11					
12					
13					
14					
	1	Estimated Shipping/Handling Charges -- 14%			
		Estimated Total Cost:			

VENDOR INFORMATION

Name _____

Existing Vendor?: Yes No*

*If NO, Obtain W-9 and Complete New Vendor Request

Administrator Approval Date

IMPORTANT

You MUST confirm receipt of your completed order with your building bookkeeper and Accounts Payable by:

- A) Returning packing slip, including signature, date, PO #, and "Okay to Pay" to building bookkeeper, or**
- B) If no packing slip is provided, send email to bookkeeper and Accounting@usd204.net indicating the vendor name, PO#, date of receipt and "Okay to Pay"**

INVOICES WILL NOT BE PAID WITHOUT CONFIRMATION OF RECEIPT

NOTE: Purchases in excess of \$20,000 must follow formal bidding procedures and require Board approval.

Purchases in excess of \$2,500, but less than \$20,000, are advised to obtain a minimum of 3 quotes.