BUSINESS OFFICE USE ONLY

Deputy Supt. Approval (Over $5,000) _____

Purchase Order # _____

Natomas Unified School District
Connecting students to their future

FISCAL YEAR 2024-25

REQUISITION FOR PURCHASE

THIS FORM IS *NOT* AN AUTHORIZED PURCHASE ORDER

☐ PURCHASE ORDER REQUESTED

☐ DISTRICT WARRANT REQUESTED (2 WEEKS)
ONLY IF VENDOR DOES NOT ACCEPT PO'S

VENDOR: _____

ADDRESS: _____

_____

PHONE #: _____

EMAIL: _____

Board Approval Date (if applicable):

VENDOR # REQUESTOR: DATE:

AVAILABLE BALANCE	Fund XX	Resource XXXX	Year X	Object XXXX	Site XXX	Goal XXXX	Function XXXX	Local 1 XXX	Local 2 XXX	Amount
$										$
$										$
$										$
$										$

Quantity	Unit	SPSA Page # (if applicable)	Item Description (including model, size, color, etc.)	Unit Price	Total Price
					$ 0.00
					$ 0.00
					$ 0.00
					$ 0.00
					$ 0.00
					$ 0.00
					$ 0.00
					$ 0.00
					$ 0.00
					$ 0.00
					$ 0.00
					$ 0.00

Subtotal $ 0.00

Sales Tax 8.75% $ 0.00

Shipping $

TOTAL $ $ 0.00

SITE/PROGRAM MANAGER APPROVAL (Print and Sign) _____ DATE _____

TECHNOLOGY DEPARTMENT APPROVAL (If Applicable) (Print and Sign) _____ DATE _____

CATEGORICAL APPROVAL (If Applicable) (Print and Sign) _____ DATE _____

DISTRICT APPROVAL (Print and Sign) _____ DATE _____

BUSINESS SERVICES APPROVAL (Print and Sign) _____ DATE _____