Purchase	e Requisi	tion	Chino Valle	∍y Unified S	School D	istrict			
Check Request Associated Student Boo					dy - Organ	nized			
Cash Pu	ırchase O	rder (	Combination Pui	rchase Requis	sition/Check	Request			
School Name						_	Number		
Student Body Account #						P.O.#			
Payee						Invoice #			
Address						Invoice #			
City, State & Zip						Date Required			
		s and Remittan	ce Copies or Orig	<b></b> <b>ginal</b> Receipts V	Vith This Re	<del>-</del> quest.)		•	
Purpose fo	or Good	s or Service	s						
Are Goods for Resale? Unused Items Returnable						Unit Resale Price \$			
SPECIAL IN	ISTRUCT	IONS: Ma	ail Check to Paye	ee Mail C	heck to Sch	nool-Attn:			
Quantity	Unit	Desc	Description of Goods or Service		ces	es Uni		Tota	al Cost
Payee Sign Below When Requesting Reimbursement							Sub-Total	\$	
						Shipping/l	Handling		
SPECIAL IN	IONS:	_	Sales Tax						
						TOTAL		\$	
Moved		S.	acandad	APPROVA	LS	Voc	No	Abatain	
Moved	01 1		econded			Yes	No	Abstain	
Appears ir	n Studer	nt Body Min	utes Dated						
Club Advis			Doto		Dringing	I/Designs			Doto
Club Advisor Date				Principa	I/Designe	е		Date	
Student Body Officer Date					District Approval Date				
			THIS SPACE FO	OR FINANCE	OFFICE U	SE ONLY			
Check Number						Current E	Balance	\$	
Issue Date						Check Ar	mount	\$	
Mail Date									
Signature -	Busines	s Office/Fina	nce Clerk		<b>₽</b>				
Distribution: V	VHITE-Bus	siness Office/Fir	nance Clerk YELL	OW-Club File	PINK-Schoo	l File	ASB	Form 638-F	Revised 2011