GUSTINE UNIFIED SCHOOL DISTRICT
1500 Meredith Ave.
Gustine, CA 95322
Phone: (209) 854-3784
Fax: (209) 854-9164

Ship To: _____
_____
_____

Department:	**Date:**
Ordered By:	**Vendor Email (for email option only):**

Purchase Order Instructions:
☐ Fax ☐ Return to site ☐ Email ☐ Other _____

BUDGET CLASSIFICATION:

VENDOR NAME: _____

ADDRESS: _____

_____

PHONE: _____ **FAX:**_____

Qty.	Description	UNIT COST	TOTAL COST
	Tax		
	Shipping		
	Total		

SCHOOL SITE _____

JUSTIFICATION:_____

DISTRICT REQUISITION #: _____ **APPROVAL:**

DISTRICT PURCHASE ORDER #: _____ _____

For LCAP Purchases **ONLY** (Required) Goal # _____ Action # _____

Example (1,2, etc.) **Example (.01, .02, etc.)**

"Purchase Order Instruction" box must be filled to avoid delay*

Revised 07/05/2016