



# St. Boniface Parish and School Purchase Order Request

**For Office Use**  
 Purchase Order #:  
 Date:  
 Vendor ID:

**Please fill out and return to Director of Administrative Services for approval no later than 2 weeks prior to placing actual order. Once approved, please give the purchase order number supplied by the DAS to the company when placing the order. All areas of PO must be completely filled out.**

Company Ordering From:

Department/Committee:

Purpose for Purchase (I.e. cleaning supplies, liturgy supplies, field trip, program enhancements, etc.):

Requested by:	Was this included in the Budget	Budget Account (i.e. marketing, school supplies, etc.)	Is reimbursement needed? If not, what is the payment method used (i.e. credit card, petty cash, etc.)

Quantity	Item	Units	Description	Discount %	Taxable	Unit Price	Total

Subtotal	
Tax	
Shipping	
Miscellaneous	
Balance Due	

**Reimburse to: (Please include name and mailing address; receipts showing proof of purchase must be attached):**

Approved  
 Not approved  
 \_\_\_\_\_  
 Supervisor or Committee Chair Signature

Approved  
 Not approved  
 \_\_\_\_\_  
 Dir. Of Admin. Services Signature

\_\_\_\_\_  
 Pastor's Signature if Needed