

PHONE: 415-332-3190  
 FAX: 415-332-9643

**PURCHASE ORDER**

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**BILL TO:**

**SAUSALITO MARIN CITY SCHOOL DISTRICT**

**ATTN: BUSINESS OFFICE**  
**200 PHILLIPS DRIVE, MARIN CITY, CA 94965**

**VENDOR**


**SHIP TO:**


<b>DATE:</b>		<b>REQUESTED BY:</b>	
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	QUANTITY	DESCRIPTION	UNIT PRICE	AMOUNT
1				
2				
3				
4				
5				
6				
7				
8				
9				
10				
11				
12				

<b>ACCOUNT NUMBER:</b>	
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Tax	
Shipping	
<b>Total</b>	

IMPORTANT INSTRUCTION FOR FILLING OUT PURCHASE ORDERS:

correspondence  
 Prices shown are maximum authorized for this order.  
 Itemized invoices stting quantity, unit price, and total cost of each item.  
 Render itemized invoice promptly for this order.

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 SITE ADMINISTRATOR APPROVAL

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 BUSINESS MANAGER VERIFICATION

"MSDS SHEETS ENCLOSED WITH SHIPMENT"