

MIAMI-DADE COUNTY PUBLIC SCHOOLS

INTERNAL FUND PURCHASE ORDER

Vendor Name	Purchase Order No. ZX-		
Address	Issue Date		
	Please refer to the above Purchase Order No. on all invoices/correspondence.		
Phone No.	No. on all in	voices/correspond	dence.
Contact Person	Sales Tax Exempt No. 23-08-324893-53C		
Ship To:	Sales Tax No. may not be used to purchase		
School	merchandise	for resale.	
Address	FOR SCHOOL USE ONLY		
	Object Program		
Attn.	Function Sub-Ledger		
Expected Delivery	Account Name		
Date Send invoices in duplicate to:	Date entered in MSAF		
Sena myorces in quipilicate to.			
Secretary/Treasurer	_ Sponsor Signature		
The School and the Dade County School Board will not be liable Order. Substitution of merchandise or change in cost is not allowed	for goods/service	es not identified o	n this Purchase
	QUANTITY		EXTENDED
ITEM DESCRIPTION	(UNITS)	UNIT COST	COST
	· · · · · · · · · · · · · · · · · · ·		
PURCHASE ORDER TOTAL			
Funds Available: Tes No Total P.O. not to exceed	\$		
		Purchase	Order must not horized unless
Secretary/Treasurer Signature	Date	be auti complete originator	ly filled out by
Principal or Delegate Signature	Date		

Note; P.O. is required on Purchases for \$100.00 or more.

878-4990