	RUNGE IN	NDEPENDENT SCHOOL I	DISTRICT		
	PURCHA	ASE ORDER/ REQUEST FOR PA	YMENT		
В	BILL TO:	VENDOR INFORMATION			
DATE:		PO NUMBER:			
		CREDIT CARD #:			
RUNGE INDEPENDENT SCHOOL DISTRICT		INVOICE NUMBER:			
ATTN: RUNGE ISD CENTRAL OFFICE		AMOUNT:			
PO BOX 158		VENDOR NAME:			
RUNGE, TEXAS 78151		ADDRESS:			
PHONE: (830) 239-43	315	CITY, STATE, ZIP:			
FAX: (830) 239-4816		PHONE NUMBER:			
SHIP ITEMS TO:		SIGNATURES REQUIRED:			
RUNGE ISD ATTN:		SIGN AND DATE:			
600 REIFFERT		ORIGINATOR:			
RUNGE, TEXAS 78151		SUPERVISOR:	SUPERVISOR:		
PHONE: (830) 239-4315 EXT:		SUPERINTENDENT:			
QTY ITEM	CODE	DESCRIPTION	PRICE PER:	TOTAL	
If more room is needed for items continue of		ue on separate sheet.	OTAL AMOUNT:		
ACCOUNT CODES:			AMOUNT:		
ACCOUNT CODES:			AMOUNT:		
ACCOUNT CODES:			AMOUNT:		
			TOTAL:		
		CENTRAL OFFICE USE:			
		PAYMENT VOUCHER			
VENDOR #:		VENDOR NAME:		DATE:	
INVOICE #:		BUDGETING CODE:		AMOUNT:	
DEMARKS			TOTAL AMOUNT:		
REMARKS:					
	APPROVED B	BY:			