

Canyons School District
REQUEST FOR QUOTATION

School Location: _____

Purchase Order # _____

Fund	Type	Location	Program	Function	Object

Date Ordered: _____

Work Order # _____

	1	2	3
Vendor			
Address			
Phone			
Fax			
Quoted by			
Terms			

Sole Source Vendor

Yes No

Reason:

Contracted Service _____

Qty	U/M	Item Description	Unit Cost	Ext	Unit Cost	Ext	Unit Cost	Ext
Added Info:			Total Quote					

List where or on what equipment materials are to be used:

Requested by: _____ Date: _____
Approved by Leadman: _____ Date: _____
Director/Coordinator Approval: _____ Date: _____
Comments: _____