REFUGIO INDEPENDENT SCHOOL DISTRICT  
BILL & SHIP TO:  212 W. Vance St.  Refugio, Texas 78377  
361-526-5400  Fax 361-526-2326  

Date: ___________________  
REQUESTION FORM  
REQ # __________________

Vendor: ___________________  
Requested by: ___________________

CIP Strategy: ___________________

Vendor Ph: ___________________  
Vendor Fax: ___________________

<table>
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<tr>
<th>Account Code (20 digit #)</th>
<th>Qty.</th>
<th>Description</th>
<th>Unit Price</th>
<th>Amount</th>
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Remarks: ___________________  
S&H

TOTAL

Requested by: ___________________  
Date: ___________________  
Accounting Approval: ___________________  
Date: ___________________

Principal Approval: ___________________  
Date: ___________________  
Received By: ___________________  
Date: ___________________

Mark order as Complete in TxEIS when all items received.

The School District assumes no liability for purchases not included on this form.
This school accepts no responsibility for back order shipments, unless approved in writing  
No C.O.D. shipments will be accepted
Mail Invoices to the Business Office, 212 W. Vance St., Refugio, TX 78377 or email to lisa.herring@refugioisd.net

Payment only upon completion of order or partial shipment with notice to cancel balance and invoiced accordingly

*Do not forget to have a W-9 and Quote attached to the Requisition Form and NO BACK ORDERS