

**HEREFORD INDEPENDENT SCHOOL DISTRICT
PURCHASE ORDER ATTACHMENT FORM
(Not required if all information is entered on the PO.)**

October 2010

VENDOR INFORMATION		
COMPANY:	CONTACT PERSON:	
ADDRESS:		
CITY:	STATE:	ZIP CODE:
PHONE NUMBER:	FAX NUMBER:	
EMAIL ADDRESS:	VENDOR NUMBER:	

SHIP TO INFORMATION		
CAMPUS/DEPARTMENT:	CONTACT PERSON:	
ADDRESS:		
CITY:	STATE:	ZIP CODE:
PHONE NUMBER:	FAX NUMBER:	
EMAIL ADDRESS:	ACCT #:	

ITEM #	QUANTITY	DESCRIPTION	UNIT PRICE	TOTAL
				\$0.00
				\$0.00
				\$0.00
				\$0.00
				\$0.00
				\$0.00
				\$0.00
				\$0.00
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				\$0.00
				\$0.00
				\$0.00
				\$0.00
				\$0.00
				\$0.00
				\$0.00

BILLING INFORMATION:
 Hereford Independent School District
 601 N. 25 Mile Avenue
 Phone: (806) 363-7600 Fax: (806) 363-7699
 businesoffice@herefordisd.net

Page 1 Total	\$0.00
Page 2 Total	\$0.00
Shipping	
Grand Total	\$0.00

