SOUTHEAST AREA COOPERATIVE
1109 W. Cedar
Beresford, SD 57004

PURCHASE ORDER
PHONE 605-763-5096
FAX 605-763-220636

TAX EXEMPT NO. 1015-5909-RS
BUSINESS MANAGERï CHERYL R JOHNSON
e-mail address: cheryl.johnson@k12.sd.us

To:_____ Purchase Order No: _____

_____ Requisition Date _____

_____ Fax No. _____

_____ Telephone No. _____

Requested By _____ Budget Code: _____

Quantity	Catalog #	Page	Description	Unit Cost	Total Cost
					0.00
					0.00
					0.00
					0.00
					0.00
					0.00
					0.00
					0.00
					0.00
					0.00
					0.00
					0.00
					0.00
					0.00
					0.00

DISBURSEMENT VOUCHER ï FOR OFFICE USE ONLY

☐ Picked-up ☐Mailed ☐Faxed ☐Telephone Order ☐Internet _____ Date _____ Initial

Date Received _____ By _____

Date Paid _____ Warrant No. _____ Warrant Amount _____

Code	Amount	Invoice #	Date	Code	Amount	Invoice #	Date

VERIFICATION OF AUTHORIZED AGENT OF DISTRICT

I declare and affirm under the penalties of perjury that this claim has been examined by me, and to the best of my knowledge and belief, is in all things true and correct. I further certify that the above services were rendered, or that the above listed materials were received in an acceptable condition and that the above claim is hereby approved by me for payment.

Date_____ 20____ Signature _____