COMMUNITY ACTION TEAM, INC
124 N. 18th St.
ST HELENS OR 97051
PHONE: 503-366-6570
FAX: 503-366-7906

REQUISITION/PURCHASE ORDER

The following number must appear on all invoices, bills of lading, and acknowledgments relating to this PO.

TO:

PURCHASE ORDER NO:
PO DATE:
DATE REQUIRED:

QTY	UNIT PRICE	DESCRIPTION	EXT PRICE	CODING: {GL(4)-FUND(4)-LOCATION(2)-PROJECT(4)}
			$ 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	

COMMENTS:	$ 0.00	SUBTOTAL
		SHIPPING
	$ 0.00	**GRAND TOTAL**

SHIP TO:

SEND CORRESPONDENCE TO:
COMMUNITY ACTION TEAM, INC
124 N. 18th St
ST HELENS OR 97051

I have reviewed the budget(s) included in this payable and understand that sufficient funding exists for this payment.

WRITTEN BY: APPROVED BY/DATE: APPROVED BY/DATE: