

Special Purchase Order Form

Please scan and e-mail to lanea@ruidososchools.org.

Event Name: _____

Ship / Bill To:

Name: _____ Address: _____

City: _____ State: _____ Zip: _____

Day Phone: _____ E-mail: _____

PO # _____

Payment Method (if no PO# is provided) _____

Due to our ordering schedule we require a 7 day lead time on items ordered through our department. Please take this into consideration when placing your Special Event Order Form.

Date Required: _____

Pickup or Delivery (Circle One)

Pickup or Delivery Time

Quantity	Item	Price
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Use blank paper if more space is necessary.

Product Amt: _____

Service Charge: _____

Service Charge is figured as follows:
\$0-\$100= 15% actual product costs
\$101 and up= 10% actual product costs

Total Amt: _____

If you have any questions OR after you submit, please call (575) 630-7993
E-mail: lanea@ruidososchools.org