



Stockbridge-Munsee Purchasing Dept.
 N8705 Moh He Con Nuck Rd.
 Bowler, WI 54416

Supply Order Form

Date: _____

ACCT # _____

Vendor(s)	Ship To	Name
_____	_____	_____
_____	_____	Dept.
_____	_____	_____

Date Received	Date Completed	Estimated Delivery Date

Qty	Item #	Description	Vendor	Unit Price	Line Total

Order Total	
Order Completed By	
Order #	

- All forms must be scanned and emailed to Roberta Carrington or sent via Inter-Office mail to Konkapot.
- Both signatures are required before order will be processed, however, if any ONE item is \$200 or more your order may be delayed.
- Orders will be processed immediately and delivered within 5 business days, depending on availability.
- Accounts Payable will use this form as authorization to pay invoice from the ACCT # listed above.
- The Purchasing Dept. has the right to substitute items or vendor for a cost savings.
- ALL PACKING SLIPS MUST BE DATED AND INITIALED ON THE DATE YOU RECEIVE THE ITEMS AND SENT TO ROBERTA CARRINGTON AS SOON AS POSSIBLE.**

Requestor Signature	Date

Director's Signature	Date