Hillsboro City Schools
Pre-Authorization/Sales Potential

ACTIVITY_____ FOR FY _____

SALES PROJECT _____PROPOSED DATES _____

PURPOSE/DESCRIPTION OF

PROJECT _____

_____

_____

VENDOR(S)/ADDRESS

REQUESTED BY:

_____
Activity Advisor Date

APPROVED BY:

_____
Principal Date

_____
Superintendent Date

Attach brochure of items to be sold, if applicable.

A.) _____ QUANTITY x __$_____ SALES PRICE = __$_____

B.) _____ QUANTITY x __$_____ COST PER UNIT = __$_____

C.) OTHER COSTS (detail below) = __$_____

APPROVED BY:

_____
Treasurer Date

Attach list of items to be ordered, if applicable.