# HOFFMAN ESTATES PARK DISTRICT

## PURCHASE ORDER REQUEST FORM

**1685 W. Higgins Road**
**Hoffman Estates, IL 60195-2998**
**Phone: (847) 885-7500 Fax: (847) 885-7523**

1. Orders are not to be placed until you have received a P.O. # from a park district supervisor.
2. All invoices must be made out and sent to the H.E.P.D. at the address above.
3. All orders must follow the H.E.P.D. purchasing policies and procedures.
4. Any purchases not following the policies and procedures will not be paid by the H.E.P.D.
5. No order will be paid for unless the team has sufficient funds in their liability account.

| Vendor's Information | Team's Information | |
|---|---|---|
| Name: | Team Name: | |
| Contact Name: | Coaches Name: | |
| Address: | Account # : | |
| Town/Zip | Coaches Phone&Fax | |
| Phone/Fax: | Date: | P.O. # |

| Description of Goods/Services | Price | Quantity | Amount |
|---|---|---|---|
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**Date Check Needed By:** _____

| **Total amount of order** | |
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