



PURCHASE ORDER

Community Counseling Services
 222 Mary Holmes Drive
 PO Box 1336
 West Point, MS 39773
 Tax Exempt Number: 64-0522444
 Preferred Vendor:
 Telephone Number / Website:

Date:
 Purchase Order Number:
 GL Account:
 Element Number:

New Vendor? Yes No
 If "Yes", ask vendor for a W-9 form.
 Payment will not be made if we do
 Not have a W-9 form. W-9 forms can
 Be emailed to dperkins@ccsms.org

QTY	ITEM #	DESCRIPTION	UNIT PRICE	LINE TOTAL
			Total	

Requested By: Date:
 Approved By: Date:
 ED/CFO/Comptroller Approval: Date:
 Purchasing Signature: Date: