BEE COUNTY

REQUISITION/PURCHASE ORDER

P.O. No. _____

Department: _____ Date: _____

Vendor: _____ Line Item Name: _____

_____ **Account Number:** ____/____/____

_____ Account Number: ____/____/____

Buy Board Purchase Yes: ☐ No: ☐

QTY	DESCRIPTION OF ITEM	UNIT PRICE	AMOUNT
		TOTAL	

Mail Invoice in DUPLICATE to: **Bee County Auditor**
105 W. Corpus Christi #310
Beeville, Texas 78102

IT IS UNDERSTOOD THAT IN ACCEPTING THIS ORDER YOU AGREE TO THE TERMS AND CONDITIONS SHOWN ON OUR REQUEST FOR QUOTATIONS, ALL OF WHICH ARE A PART HEREOF.

1. ALL PRICES MUST BE QUOTED F.O.B.BEEVILLE. SHOW UNIT PRICES, EXTENSIONS, AND GRAND TOTAL. IN CASE OF DISCREPENCY BETWEEN UNIT PRICE AND EXTENSION, THE UNIT PRICE WILL BE TAKEN.
2. **NOTE: The County of Bee is exempt from all Federal and State Taxes.** **DO NOT** Include tax in your price or invoice
3. The Purchase Order number must appear on all invoices, shipping papers packages and correspondences.

REQUESTED BY: _____
Department Head

FUNDS AVAILABLE: _____
County Auditor

APPROVED BY: _____
County Judge

Provide Original and a signed copy to Auditor **1-Departmental copy**