



PROCUREMENT SHEET

P.O. Box 684 ■ Casper, WY 82602 ■ 265.0249 ■ montessoriofcasper.com

Item Name:	
Description:	
Restrictions/Expiration:	
Physical item _____	Gift Certificate _____
Item in possession _____	To be delivered or picked up _____

Business/Individual:	
Contact Name:	
Address:	
Phone:	Fax:
Donation credit listed as:	
Fair Market Value: \$	
Established by: <input type="checkbox"/> Donor Invoice <input type="checkbox"/> Appraisal <input type="checkbox"/> Sales Receipt <input type="checkbox"/> Donor Stated Value	
Procured by:	
Phone:	Date:
Comments:	

FOR OFFICE USE ONLY:

Entered by:	Date:	Item#
-------------	-------	-------