



# Ordering Guideline Template

**Vendor Name** \_\_\_\_\_

**Your Name** \_\_\_\_\_

**Date of Order** \_\_\_\_\_

**PO Number** \_\_\_\_\_

**Customer Name** Nine Mile Falls School District

**Bill to Information** Nine Mile Falls School District

**Attention** Accounts Payable

**Email** [accountspayable@9mile.org](mailto:accountspayable@9mile.org)

**Address** 10110 W Charles Rd, Nine Mile Falls, WA 99026

**Phone** 509-340-4308

**Ship to Information** \_\_\_\_\_

**Attention** \_\_\_\_\_

**Address** \_\_\_\_\_

**Phone** \_\_\_\_\_

Tax Rate Information to Share with Vendor		2022
Pick up in Spokane		9.0%
District Office		8.1%
Nine Mile Falls Elementary		8.1%
Lakeside High School		7.8%
Lakeside Middle School		7.8%
Lake Spokane Elementary		7.8%

## Packing Slip

Once received, verify items received as ordered, make necessary comments (back-ordered items, missing items, extra items, etc.), sign, date, and send to [accountspayable@9mile.org](mailto:accountspayable@9mile.org)