

FORM AF-115
HOUSTON INDEPENDENT SCHOOL DISTRICT
AUTHORITY TO PURCHASE GOOD AND SERVICES FROM ACTIVITY FUNDS

(Campus Name)

(Date)

I request permission to purchase the following goods and/or services:

Fund #	Fund Name	Amount	Actual/Estimate

(Teacher/Sponsor's Printed Name)

(Principal's Printed Name)

(Teacher/Sponsor's Signature)

(Principal's Approval Signature)