

## 2023 Purchasing Fundamentals

Have you been in your purchasing position for less than two years? TASBO Purchasing Fundamentals has just what you need. Address the core skills that effectively guide coordinators, directors, or supervisors in a specific school business capacity. Explore terminology, best practices, reporting, deadlines, rules, and legal requirements. Connect with colleagues around the state and leave with the day-to-day knowledge you need to be successful in a Texas school district. **CEU 6/CPE 7**

**Tuesday, October 10, 2023**

**Day 1: 8:30 AM to 4:45 PM**

Sheraton Austin Georgetown Hotel and Conference Center

1101 Woodlawn Avenue, Georgetown, TX, 78628

**FEE:** \$235 Member | \$285 Non-Member

**PREREQUISITE:** None

**LUNCH:** Provided by TASBO

**CEU/CPE Hours:** 6/7

**BOOK YOUR HOTEL:** **BOOK YOUR HOTEL:** [Book your sleeping room online](#) at the TASBO room rate of \$189. Block closes September 18 or when sold out. Self-parking is complimentary.

**CONDITIONS:** Satisfactory meeting room temperatures are difficult to maintain. Always bring a sweater or jacket to ensure comfort. Business casual attire is acceptable.

**ABOUT TASBO EVENTS:** Seating is limited, so register early. If you or (someone attending with you) need ADA assistance to participate, please call us at 512-462-1711

**CANCELLATION POLICY:** Cancellations are only accepted **in writing**. Cancellations received seven (7) working days before the event are cancelled in full, those received one (1) to six (6) working days before the event are cancelled at 50 percent, and cancellations are not accepted the day of or after the event. If you do not cancel and/or do not attend, you are still responsible for payment. If TASBO cancels an event, you will be refunded in full.

**Register online at [TASBO.org](https://tasbo.org) or return completed form by:**

**Mail:** 5920 W. William Cannon, Building  
1, Suite 200, Austin, TX 78749

**Fax:** 512.462.1782

**Email:** [register@tasbo.org](mailto:register@tasbo.org) (DO NOT email  
Credit Card info)

*Please PRINT clearly.*

Name: \_\_\_\_\_ Title: \_\_\_\_\_

District/Employer (*do not abbreviate*): \_\_\_\_\_

Contact Phone: \_\_\_\_\_ Email: \_\_\_\_\_

**Payment Method:**       PO \_\_\_\_\_       Check Enclosed       Credit Card

Cardholder Name: \_\_\_\_\_ Daytime Phone: \_\_\_\_\_

Card Number: \_\_\_\_\_ EXP (MM/YY): \_\_\_\_\_

Billing Address: \_\_\_\_\_

Cardholder Signature: \_\_\_\_\_