

# POLAND CENTRAL SCHOOL

Purchase Category:		<input type="checkbox"/> Materials/Supplies	<input type="checkbox"/> Equipment	<input type="checkbox"/> Textbooks	<input type="checkbox"/> Other (i.e. Professional Membership)
Please, provide complete information prior to submmittal to the Business Office to assist with efficient processing.					
Date of Request:			Vendor/Company:		
Employee Name:			Address:		
Grade or Subject:			City:		
For Business Office Use: Budget Code#			State:		Zip Code:
Quantity	Catalog/Product Number	Description of Item	Unit Price	Total Price	Notes
Signature of supervisor indicating approval:					