## FABIUS-POMPEY CENTRAL SCHOOL DISTRICT

Fabius, New York 13063 **REQS Building:** Elementary **Purchase Requisition** Middle School \_\_\_\_ **High School** 2024-2025 Districtwide Bus Garage EMPLOYEE/ REQUISITIONER NAME (PRINT) Subject/Grade \_\_\_\_\_\_ **Product Type: Instructional Supplies Library Books Computer Software General Supplies Computer Supplies** Library/AV ( ONE VENDOR PER REQUISITION ) \_\_\_\_\_ **VENDOR NAME:** \_\_\_\_\_Telephone:\_\_\_ Address: FAX #: \_\_\_\_\_ Email & Web Address: Sales Rep: (if applicable) Catalog Unit Extended Quantity **Description of Item** Page # Item # \$ Cost \$ Total \$ Signature: Date: \_\_\_\_\_ Page #1 Total Employee's/Requisitioner's Signature Page #2 Total Signature: Employee's Supervisor's Signature Subtotal Signature: 10% Ship/ Handl. Date: \_\_\_\_\_ Purchasing Agent's Signature **TOTAL** Business Office Use \_\_\_\_ Date\_ Account # P.O. #\_\_\_\_ Vendor #

Page 1 of 2