Supply Requisition Form

Date: _____ Teacher: _____

Date Required: _____ Room: _____

				USE FOR PRICE QUOTES					
				Vendor #1		Vendor #2		Vendor #3	
				Office Depot					
Item #	Description	Unit	Quantity	Price	Extension	Price	Extension	Price	Extension
	Dry Erase Markers								
	Dry Eraser								
	File Folders								
	File Folders-Hanging								
	Highliter								
	Ink Pens								
	Labels								
	Notepads								
	Paper Clips - Large								
	Paper Clips - Small								
	Pencils								
	Post It Notes								
	Push Pins								
	Scissors								
	Staple Remover								
	Stapler								
	Staples								
	Tape Dispenser								
	Tape-Masking								
	Tape-Packing								
	Tape-Scotch								
			Subtotal						
			Tax						
			Shipping						
			Total						

Vendor: _____

Address: _____

City, ST, Zip: _____

Telephone _____

Fax: _____

Supervisor's Signature: _____

For Business Office Use Only	
Account Code:	
Purchase Order #:	
Date Issued:	

Instructions: Complete this form and submit to Christine for office supplies. Supplies will be orderd as soon as possible.