

BERLIN CENTRAL SCHOOL DISTRICT
PURCHASE REQUISITION
PLEASE CAREFULLY READ ITEMS # 1- 5 BELOW

BUDGET CODE

VENDOR: _____
ADDRESS: _____
CITY/ST/ZIP: _____
PHONE #: _____
FAX #: _____

SHIP TO ATTENTION: _____
BUILDING: _____
SHIP TO ADDRESS: _____

STATE CONTRACT #: _____

BID/QUOTE #: _____

QTY.	ITEM NO.	DESCRIPTION	UNIT PRICE	TOTAL COST
			\$.	\$.

SUBTOTAL \$ _____
SHIPPING 15% \$ _____
GRAND TOTAL \$ _____

YOUR SIGNATURE AS REQUISITIONER INDICATES THAT:

1. If items are available from more than one source, you have compared prices and selected the least costly option meeting specifications.
2. Any premiums received in consideration of the purchase will be forwarded to the Business Office prior to distribution and/or use.
3. This purchase complies with DISTRICT POLICY 4.250-08 AND 4.250-08R.
4. You have attached **ALL** quotes and/or price comparison forms to this document. (Textbook evaluation forms if applicable.)
5. **ALL** product costs and shipping costs have been checked prior to entering requisition.

AUTHORIZATION APPROVAL:

REQUISITIONER

ADMINISTRATOR

REQUISITION ENTERED BY

DATE

DATE

DATE