

- Internal Use Only -

Purchasing Department

TRENTON BOARD OF EDUCATION

Requisition No.

REQUISITION FORM

PLEASE TYPE OR PRINT
(Must Be Legible)

VENDOR / PAYEE:

SHIP TO OR SERVICES PROVIDED TO SCHOOL / DEPARTMENT:

DATE OF REQ.	VENDOR NO.	ACCOUNT NO. (SEE BELOW FOR MULTIPLE ACCOUNT NOS.)	DATE REQUIRED	STATE CONTRACT NO.
--------------	------------	---	---------------	--------------------

QUANTITY	DESCRIPTION OF GOODS OR SERVICES	ITEM NO.	UNIT PRICE	EXTENSION
----------	----------------------------------	----------	------------	-----------

THIS IS NOT A
PURCHASE ORDER

THIS REQUISITION FORM MUST INCLUDE ALL SHIPPING, HANDLING AND DELIVERY COSTS.

SHIPPING CHARGES \$ _____

TOTAL

ACCOUNT NUMBER

AMOUNT

ORIGINATOR

APPROVED BY: ADMINISTRATOR / PRINCIPAL / SUPERVISOR

TOTAL

BUSINESS ADMINISTRATOR

PURCHASING COPY