

**GENERAL McLANE SCHOOL DISTRICT
2019-2020 BUDGET REQUISITION**

(PLEASE READ INSTRUCTIONS ON REVERSE BEFORE COMPLETING THIS FORM)

SCHOOL: HS _____ EE _____ PERSON REQUESTING: _____
 MS _____ ME _____ DEPT/GRADE LEVEL: _____
 SUBJECT AREA: _____

SUPPLIER NAME: _____
 ADDRESS: _____
 PHONE: _____ SUPPLIER CONTACT NAME: _____
 FAX: _____
 EMAIL: _____ CATALOG NAME: _____
 WEBSITE: _____ CATALOG YEAR: _____ QUOTE DATE: _____

REQUEST JUSTIFICATION: _____

ACCOUNT NUMBER: 10 - _____

Grade Level	Quantity	Item Description	Unit Price	Extended Price
			Subtotal	
Shipping & Handling		Add 15% (20% for Science Orders)		
			TOTAL	

Principal's Recommendation _____ Date _____

Superintendent's Tentative Approval _____ Date _____

Superintendent's Final Approval _____ Date _____

Purchase Order # _____ Date _____

INSTRUCTIONS

Do not place items from more than one supplier on this Budget Requisition Form

Do not place requests for more than one Budget Account Number on one form. For example, do not place requests for textbooks and workbooks on the same form even though they may be ordered from the same supplier.

All sections of this form must be completed as indicated in the Specific Directions listed below.

SPECIFIC DIRECTIONS

1. School	Place a check next to the school to which the requester is assigned and to which the materials will be delivered.
2. Person Requesting	The person completing this form should sign in this space.
3. Dept/Grade Level	Indicate the department or grade level for which the material is being ordered.
4. Subject Area	Indicate the specific subject area within the department or grade level listed in #3.
5. Supplier Name	Indicate the recommended supplier for the materials.
6. Supplier Address	Indicate the full mailing address for the supplier.
7. Supplier Phone	Indicate the phone number for the supplier
8. Supplier Fax	Indicate the fax number for the supplier.
9. Supplier Email	Indicate the email address to which the Purchase Order may be sent.
10. Supplier Website	Indicate the website from which the order may be placed if on-line ordering in necessary.
11. Supplier Contact Name	Indicate the contact name within the supplier company.
12. Catalog Name	Indicate the name of catalog/brochure that was used to obtain the material information.
13. Catalog Year	Indicate the date of the catalog that was used to obtain the material information.
14. Quote Date	Indicate the date of the quote that was obtained (and attach).
15. Request Justification	Why is this material needed? For example, are these replacements for consumable materials, fill-in copies or current use materials, etc. All requests must include a specific justification. SUBMIT REQUESTS ONLY FOR ITEMS ESSENTIAL TO CONTINUE PRESENT PROGRAMS.
16. Account number	To be completed by building Principal
17. Grade Level	Accounting procedures from PDE require reporting purchases by grade level for K through 6. If the materials are to be used building wide, put the letter B in this column.
18. Quantity	Indicate the number of items being requested.
19. Item Description	Give a full description of the item including catalog numbers, model numbers and/or any other information that will be needed to order this item.
20. Unit Price	Indicate the price per item.
21. Extended Price	Indicate the unit price multiplied by the quantity requested.
22. Shipping & Handling	Add 15% to the subtotal; 20% for science orders.
23. Total	Indicate the sum all items, plus shipping and handling.

All other sections on the form will be completed by the Principal or the Superintendent.

USE BLACK INK OR TYPE