

FABIUS-POMPEY CENTRAL SCHOOL DISTRICT

EQUIP

Fabius, New York 13063

EQUIP

Building: Elementary \_\_\_
Middle School \_\_\_
High School \_\_\_
Districtwide \_\_\_
Bus Garage \_\_\_

Equipment / Furniture
2024-2025

Replacement: \_\_\_
New: \_\_\_
Reg. Budget: \_\_\_
Cap. Project: \_\_\_

EMPLOYEE NAME \_\_\_\_\_ Subject/Grade \_\_\_\_\_

Equipment Type: Classroom Furniture \_\_\_ Classroom Equipment \_\_\_ Computer Hardware \_\_\_
Library A/V Equipment \_\_\_ Athletic Equipment \_\_\_ Other \_\_\_

Use one form for each equipment/furniture request. The description should include: brand name; item number; size or capacity; special mechanical needs, such as 110 or 220 electrical wiring; and color preference. Check "YES" or "NO" if it is possible to substitute another brand of equal quality, or a smaller capacity or size. If "NO" is checked please explain why in your "JUSTIFICATION."

DESCRIPTION OF ITEM: Substitution? Yes \_\_\_ No \_\_\_ Quantity: \_\_\_\_\_

UNIT PRICE: Include three price quotes from three vendors, unless the item is on a NYS or BOCES bid, if so, list the bid.

Vendor #1: Price Quote: \$
or NYS Bid Telephone:
Address FAX #:
ITEM #

Vendor #2: Price Quote: \$
or BOCES Bid Telephone:
Address FAX #:
ITEM #

Vendor #3: Price Quote: \$
Address Telephone:
FAX #:
ITEM #

Please provide a justification for this request. Include why the item is essential; how it will improve the overall educational environment of your area/program, and how the improvement can be assessed.

JUSTIFICATION: \_\_\_\_\_

Signature: Date: Subtotal
Employee's/Requisitioner's Signature
Signature: Date: 10% Ship/Handl.
Employee's Supervisor's Signature TOTAL
Signature: Date:
Purchasing Agent's Signature

Business Office Use
Vendor # P.O. #
Account # P. O. Date