

FABIUS-POMPEY CENTRAL SCHOOL DISTRICT

Fabius, New York 13063

TEXT

TEXT

Building: Elementary
 Middle School
 High School
 Districtwide

Textbooks

2026-2027

Program: General
 CSE

 Funding: Federal
 Grant

EMPLOYEE NAME _____

Subject/Grade _____

note: use separate form for each subject area

VENDOR NAME: _____ Telepl _____

Address: _____ FAX #: _____

Sales _____

(if applicable)

Quantity	em #	Title	Author	Publisher	Date of Issue	Unit Cost	Extended \$ Total
1							
2							
3							
4							
5							
6							

Signature: _____
 Employee's/Requisitioner's Signature

Date: _____

Subtotal _____

Signature: _____
 Employee's Supervisor's Signature

Date: _____

TOTAL _____

Signature: _____
 Purchasing Agent's Signature

Date: _____

Business Office Use

Account #: _____