Severe Supplies Request Form

|  |  |
| --- | --- |
| Student Demographics  (Name, Grade, School) | **Name:**  **Grade:**  **School:** |
| AB Ed Code/Rubric No. |  |
| Description (be specific)  Price of Item(s) | **Item:**  **Price:**  **Supplier:** |
| Provide rationale for purchase of item(s) |  |
| Your Name/School  (please print) | **Name:**  **School:** |
| **Principal:**  ***please review, date & sign*** | **(School Principal) (Date)** |

**FOR INTERNAL USE ONLY**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
|  | ACCOUNT | | AMOUNT | | G.S.T. | |
| Received: |  | |  |  |  |  |
| Reviewed: |  | |  |  |  |  |
| Approved By: |  | |  |  |  |  |
| *(Central Office)* |  | |  |  |  |  |
|  |  | |  |  |  |  |
|  |  | |  |  |  |  |
| VENDOR No. | CHEQUE No. |  |  |  |  |  |
|  |  | TOTALS |  |  |  |  |