

Salem Board of Education
Purchase Requisition
Attn: Kim Gadaree, Business Manager
200 Hartford Road
Salem, CT 06420-3408
860 892-1223
FAX 860 859-2130

VENDOR:

P.O. #

Address:

Date Submitted:

Phone

Fax

Web

Qty	Rec'd	Catalog #	Description	Unit Price	Total Price

Subtotal

Submitted by:

Shipping and Handling

Teacher Name:

TOTAL DUE

Grade/Program:

Software:

Yes____ No ____

I certify that there is an appropriation available with an unencumbered balance
sufficient in the amount to pay for the items covered by this order.

Authorized Signature

Title

Date

Acct#

Account Name: _____