

## Title III – LEP Grant – PO Requisition

Contact Name: Your name Contact Phone: Your primary phone number

Ship to: Your school address where you want items delivered Fax No.: Your Fax#

District: Your School District Name Date of Request: \_\_\_\_\_

Building: Name of the Building where you want items delivered Type of Request:

Building Address: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 City/State/Zip: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Instr Serv/Tutors (411) \_\_\_\_\_  
 Prof Dev/Purch Service (412) \_\_\_\_\_  
 Family/Comm Pur Serv(419) \_\_\_\_\_  
 Supp Serv/Interpreters (419) \_\_\_\_\_  
 Nonpublic Service (419) \_\_\_\_\_  
 Travel/Meetings (430) \_\_\_\_\_  
**Instructional Mat. (511) x** \_\_\_\_\_  
 Instruct Software (516) \_\_\_\_\_  
 Family/Com Supplies (519) \_\_\_\_\_  
 Nonpublic Supplies (519) \_\_\_\_\_  
 Prof Dev Supplies (519) \_\_\_\_\_

Vendor Name: Vendor Name Vendor Phone: Vendor Phone#  
 Address: Vendor Address Vendor Fax: \_\_\_\_\_  
 City/State/Zip: City, State, Zip Vendor No. (ESCCO) only: \_\_\_\_\_

### Items to be ordered:

QTY	Type	Catalog #	Description	Unit Price	Total Price
How many		ISBN#	Describe item	Price/each	Total Price
2		359887	Two books by Mr. XYZ	\$50.00	\$100.00

Requisition Number: \_\_\_\_\_  
 Requisition Date: \_\_\_\_\_

Subtotal:	\$100.00
Shipping:	<b>\$12.50 include</b>
<b>Total:</b>	<b>\$112.50</b>

TI      FUND      FUNC      OBJ      SCC  
05      551      1251      511      9000

Director: Your Supervisor's signature

E-mail Requisition to: [Richelle.Fisher@escoco.org](mailto:Richelle.Fisher@escoco.org)  
 P: 614.753.4684, F: 614.753-4699