



DUNCANVILLE ISD

Writing success stories, one student at a time.

DUNCANVILLE ISD PURCHASE \$10,000 - \$49,999 REQUEST FORM

(Not required for Operations Departments)

(Campus/Department Name)

(Date Submitted)

Purchase Description (Goods, Services, Products, Quantity)

How will goods/services purchased be used?

Who is the vendor? _____

Total amount of purchase: \$ _____

Is the vendor a member of a cooperative? BuyBoard, TCPN, EPCNT, etc. YES or NO

If so, which cooperative(s)? _____

How will this purchase be paid for? (Give account code) _____

Will federal funds be used YES or NO

APPROVALS:

(Principal Signature) **Date:** _____

(Department Director Signature) **Date:** _____

(Federal Programs Signature) **Date:** _____

(Chief of Schools or Chief Academic Officer Signature) **Date:** _____

(CFO/Accounting Signature) **Date:** _____

(CTO Signature) **Date:** _____

(Purchasing Signature) **Date:** _____

(Superintendent of Schools Signature) **Date:** _____