

REQUEST FOR PURCHASE

Date: _____

Westerly Public Schools
23 Highland Avenue
Westerly, RI 02891

**Bill To: Westerly Public Schools
45 Broad Street
Westerly, RI 02891
Attn: Ian Nelson**

Vendor: _____
Vendor # _____
Account Code: _____

Ship To: _____

[illegible]

Signature: _____