

JANITORIAL REQUISITION FORM
BYHS, NORTH, SOUTH, STONEY, OAKWOOD, DILLARD
Email: kathy.steele@caswell.k12.nc.us or Fax: 336-694-5249

SCHOOL _____ DATE _____

Principal Signature _____

Vacuum Items

VACUUM BELT: ROYAL _____ Relivac _____ Advance vacuum _____

VACUUM Bags: ROYAL B _____ Relivac _____ Advance vacuum /VU-500 _____

Royal Orange replacement bag / vacuum _____ Propane Vac. Backpack bags _____

CLEANING SUPPLIES & PAPER PRODUCTS

SINGLE FOLD TOWELS _____ Kindergarten grades only

CLASSROOM WASTE CAN _____

32 GL WASTE CAN W/LID _____

Wasp Spray _____

GlybetII _____ (germicidal aerosol for flu and illnesses)

Vitasol (germicidal spray cleaner) _____ (Flu & viruses)

Fight Bac _____ disinfectant for Covid-19

Mop Bucket /set _____ Wet Floor Signs _____

SINK PLUNGERS _____

TOILET PLUNGERS _____

Soap Dispensers _____

Toilet Paper Dispensers _____

Replacement Bag for Utility Cart _____

ICE MELT _____ (All Schools: 1 to 2 bags) when needed

Buffer Propane Gas _____ for gas buffers

Oil for Gas Buffer _____ for gas buffers

Motor Oil for lawnmower _____

Weedeater mix gas _____

GAS : Send your request to John Berdine/Transportation for mower gas and vehicle gas.