

TECHNOLOGY SERVICES  
**ORDER REQUEST FORM**

(Computer hardware, software, peripherals, AV equipment, assoc. supplies)\*

TO: Technology Services  
Attn: Dwight Levens

FROM: \_\_\_\_\_ School: \_\_\_\_\_

Date: \_\_\_\_\_

Please Order the Following:

QUANTITY	ITEM (Include brand name, model)	UNIT COST	TOTAL
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REASON FOR PURCHASE:

ACCOUNT/S TO CHARGE:

DELIVER TO (Include name, room):

PRINCIPAL / BUDGET MGR. SIGNATURE: \_\_\_\_\_

ORDERS WILL BE PROCESSED THE LAST FRIDAY OF EACH MONTH EXCEPT MAY AND JUNE

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Technology Services Approval: \_\_\_\_\_

Work Order #: \_\_\_\_\_ Date Received: \_\_\_\_\_

*\*District may not support all software and hardware purchases. Please call 34601 for inquiries.*