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| TEACHER: | |  | | NORTH EAST SCHOOL DISTRICT | | | | | BUILDING: | | | |  | | | |
| DEPARTMENT: | |  | | PURCHASED PROFESSIONAL AND | | | | | DATE: | | | |  | | | |
| SUBJECT: | |  | | TECHNICAL SERVICES | | | | |  | | | | | | | |
| GRADE: | |  | | 329 | | | | |  | | | | | | | |
|  | | | | | ONE SUPPLIER PER PAGE | | | | | | | | | | | |
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| **Professional or Technical Services to be Provided** | | | | | | | | **Unit of Measure** | | | **Quantity Requested** | | | **Unit Price** | | **Total Price** |
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| TOTAL THIS PAGE | | | | | | | | | | | | | | | |  |
| SUPPLIER OF SERVICES – Name: | | |  | | | | | | | | | | | | | |
| Address: | | |  | | | | | | | | | | | | | |
| City, State, & Zip Code: | | |  | | | Telephone Number: |  | | | | | Fax Number: | | |  | |
| **REQUEST REVIEWED BY DEPT. CHAIR: APPROVED: DISAPPROVED:­­­­**  **DATE:** | | | | | | | | | | | | | | | | | | |
| REQUEST REVIEWED BY PRINCIPAL: APPROVED: DISAPPROVED: DATE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | | | | | | | | | | | | | | | |
| NOTE: ALL INFORMATION IS NEEDED IN DETAIL BEFORE ORDER WILL BE PROCESSED. | | | | | | | | | | | Two copies distributed following administrative approval/funding: | | | | | | | |
|  | | | | | | | | | | | 1. Department Chairperson | | | | | | | |
|  | | | | | | | | | | | 2. Teacher | | | | | | | |
| ACCOUNT CODE: | |  | | | | | | | | | Principal retains original copy. | | | | | | | |