REQUEST FOR MATERIALS

Revised 04/16

NCKSEC INTERLOCAL #636

P.O. Box 369
Phillipsburg, KS 67661

Phone: 785-543-2149 **www.ncksec.net** Fax: 785-543-6654

INSTRUCTIONS:

1. Print legibly or type.
2. Use a separate sheet for each vendor.
3. Fax to the NCKSEC Central Office when completed.

Date: _____

Name_____ USD_____ Elem. Jr. High Sr. High
(Circle One)

Company:_____ Co. Fax Number:_____

Mailing Address:_____

_____ Zip_____

OFFICE USE ONLY A/C #

Page #	Qty	Item Number	Title/Description	Unit Price	Total

Please explain why these items are necessary and how they will be used: **Total:**

Principal Approval _____

Director Approval_____