

NCKSEC Interlocal #636
REQUISITION FOR LOCAL PURCHASES UNDER \$50
PRIOR APPROVAL REQUIRED

Phone: 785-543-2149

Send or Fax to:

Fax: 785-543-6654

P.O. Box 369
 Phillipsburg, KS 67661
www.ncksec.net

Merchant/Business Name _____

Date: _____

Address _____ City _____

Quantity	Item/Description	Code (Office Use Only)	Unit Price	Total Price

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

Requested by: _____

(Certified Staff Only)

ES JH HS

No Reimbursement without Director's Signature

Department: _____

NCKSEC Director _____