

COPY MACHINES OPEN PAYMENT 2009-2010 School Year

Please complete a separate form for each machine.

Location	Department/Program	Requested by	Date
Principal's Approval		Account Code*	Date

*If different account codes are to be used, please designate in the 1st column below.

Description	
<p style="text-align: center;">Lease <input type="checkbox"/></p> <p style="text-align: center;">Account Code❖</p>	<p> <input type="checkbox"/> <i>Monthly Amt</i> _____ <input type="checkbox"/> <i>Quarterly Amt</i> _____ </p> <div style="text-align: right; border: 1px solid black; padding: 2px; display: inline-block;">Check one</div> <p> Vendor name _____ Contract # _____ Vendor address _____ Model # _____ Vendor city, state, zip _____ Serial # _____ </p>
<p style="text-align: center;">Maintenance <input type="checkbox"/></p> <p style="text-align: center;">Account Code❖</p>	<p> <input type="checkbox"/> <i>Monthly Amt</i> _____ <input type="checkbox"/> <i>Quarterly Amt</i> _____ </p> <div style="text-align: right; border: 1px solid black; padding: 2px; display: inline-block;">Check one</div> <p> Vendor name _____ Contract # _____ Vendor address _____ Model # _____ Vendor city, state, zip _____ Serial # _____ </p>
<p style="text-align: center;">Additional Charges <input type="checkbox"/></p> <p style="text-align: center;">Account Code❖</p>	<p> <input type="checkbox"/> <i>Additional copy charge of _____ per copy over _____ number of copies</i> <input type="checkbox"/> <i>Additional charge for supplies</i> <input type="checkbox"/> <i>Other (description) _____</i> </p> <p> Vendor name _____ Contract # _____ Vendor address _____ Model # _____ Vendor city, state, zip _____ Serial # _____ </p>

❖ Complete only if account codes are different than what was entered at the top of the page.