El Paso County E.S.D 2

Request Form

Date of Requisition: Station:

Requestor Name:

Check One

☐Fire Equipment ☐Furniture & Equipment ☐Janitorial

☐Fire Prevention ☐Office Supplies

Item Description	Quantity	Suggested Vendor

Reason for purchase (replacement, need etc.):_____

_____

_____

Additional Comments:_____

_____

Signature:_____

Revised: 10/28/2020