

Bill to/Ship to 2511 Numa Watson Rd  
Seaside, CA 93955

**CHARTWELL SCHOOL PURCHASE REQUEST FORM**

PO# **30119**

Transaction Date: 7/1/20  
Requestor: John Langrill  
Charge to Department: IT  
Purchase From (Vendor): Tech to School!

Payment Type:  
Paid by School Credit Card  Paid Myself  Please Issue Check to Vendor  Please Order Item For Me   
Date Order \_\_\_\_\_  
Ordered By \_\_\_\_\_

QUANTITY	ITEMS & DESCRIPTION	UNIT COST	TOTAL COST
	Quote MTS959411		
	40 Macbook Air 13"		
	(Attach receipt or verification of purchase price and separate sheet if necessary)		
		<b>TOTAL</b>	<b>38,691.30</b>

Please State Reason For Purchase:  
For Teachers, tutors & subs

I certify the expenditures incurred are appropriate to this account, serves the purpose as stated above.

[Signature] 7/1/20 \_\_\_\_\_  
Requestor Date Supervisor Date Head of School Date

**REIMBURSEMENT REQUEST FORM**

All requests for reimbursement must be submitted within **15 days** from the date incurred and accompanied with supporting documents, signatures and prior purchase approval. Please allow two to four weeks for the Business Office to process your reimbursement.

Date Reimbursement Requested: \_\_\_\_\_ Requestor \_\_\_\_\_ Date \_\_\_\_\_

I authorize that the following individual be reimbursed for the materials pre-approved for purchase above.

Supervisor \_\_\_\_\_ Date \_\_\_\_\_ Head of School \_\_\_\_\_ Date \_\_\_\_\_