HABERSHAM COUNTY SCHOOL DISTRICT

Request for Federal Funds

Reason for Request:

BOE Check: _____

Journal Entry: _____

Purchase Order: _____

Choose: ____ Title I ____ Title I-C ____ Title III ____ Title IV ____ Title IV-A

Requisition #_____
(Admin use Only)

Vendor Name & Address:	**Ship To Facility Name & Address:**

Quantity	Item Number	Description	Unit Price	Total
Special Instructions:			**Sub Total**	
			Shipping	
			Total	

Budget Code: Fund-Year-Function-Object-Program-Facility	Note/Comment	Amount

Attest: When signing a Title purchase request, you are certifying to the best of your knowledge and belief that the report is true, complete, and accurate, and the expenditures, disbursements and cash receipts are for the purposes and objectives set forth in the terms and conditions of the Federal award. You are also signing that you are aware that any false, fictitious, or fraudulent information, or the omission of any material fact, may subject me to criminal, civil or administrative penalties for fraud, false statements, false claims or otherwise. (U.S. Code Title 18, Section 1001 and Title 31, Sections 3729-3730 and 3801-3812).

Requested By **Date** **Approved by** **Date**

Rev. 7/1/19