## **Billings Public Schools Tag/Equipment Form**

Name:	Date:
	Date of Purchase:
Vendor:D	escription of Merchandise:
	Serial Number:
Pcard# (last four digits)	Card Holder:
Receipt Attached: Yes No	Name
Account Code:	
PURCHAS  Date Received:	SING DEPARTMENT USE ONLY
Tag #:	Date Issued:
Director of Purchasing Approv	val:
INSTRUCTIONS:	
Make oursell required information	. (1)

- 1. Make sure all required information is filled in
- 2. Copy of receipt
- 3. Send original Billings Public Schools Tag/Equipment Form 4. Forward all documents to Gregg or Brent/Warehouse

PLEASE SEND THIS FORM WITH YOUR ATTACHED RECEIPT TO THE PURCHASING DEPARTMENT