



# WINN PARISH SCHOOL BOARD

## Requisition for Janitorial Supplies

SCHOOL :

DATE

QUANTITY ORDER	QUANTITY SHIPPED	ITEM DESCRIPTION
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### BATHROOM SUPPLIES

		EACH	ACRILON BOWL MOP
		EACH	BRUSH BOWL MOP
		EACH	TOILET TISSUE HOLDER - ROLL
		96 EA	TOILET TISSUE-SINGLE PLY 1000 SHTS/ROLL
		96 EA	TOILET TISSUE-DOUBLE PLY 500 SHTS/ROLL
		12 EA	TOWELS - 1910 BROWN ROLL 8'x350'
		CASE	TOWELS - CENTER FOLD WHITE 10 1/4x12 3/4
		CASE	TOWELS - SINGLE FOLD NATURAL
		EACH	TOWEL DISPENSER 1910 ROLL
		12 PK	URINAL BLOCK - 4 oz. CHERRY
		12 PK	URINAL SCREENS
			OTHER: _____
			_____
			_____
			_____

### LIGHT BULBS

		36 (BOX)	4' FLUORESCENT TUBE T8
		30 (BOX)	4' FLUORESCENT TUBE T12
		15 (BOX)	8' FLUORESCENT TUBE (SPECIAL ORDER)
		EACH	40 WATT INCANDESCENT BULB
		EACH	60 WATT INCANDESCENT BULB
		EACH	100 WATT INCANDESCENT BULB
		EACH	2 N ELECTRIC BALLAST
		EACH	3 N ELECTRIC BALLAST
		EACH	4 N ELECTRIC BALLAST
			OTHER: _____
			_____
			_____
			_____

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**BROOMS-MOPS-FLOORS**

_____	_____	EACH	BROOM -- REGULAR PARLOR
_____	_____	EACH	PARLOR DUSTPAN
_____	_____	EACH	DUST PANS (RUBBERMAID OR EQUAL)
_____	_____	5 (BOX)	17" BLACK FLOOR STRIPPING PADS
_____	_____	5 (BOX)	20" BLACK STRIP SPRAY BUFF PADS
_____	_____	5 (BOX)	17" RED FLOOR BUFF PADS
_____	_____	5 (BOX)	20" RED SPRAY BUFF PADS
_____	_____	5 (BOX)	17" WHITE BUFF PADS
_____	_____	5 (BOX)	20" WHITE SPRAY BUFF PADS
_____	_____	EACH	MOP BUCKET WRINGER COMBO
_____	_____	EACH	MOP HANDLES -- JANITOR
_____	_____	EACH	MOP HANDLES -- LAYFLAT
_____	_____	EACH	MOP HANDLES -- MAID
_____	_____	16 OZ	RAYON LAYFLAT MOP HEAD - SCREWTYPE
_____	_____	20 OZ	RAYON LAYFLAT MOP HEAD - SCREWTYPE
_____	_____	24 OZ	RAYON LAYFLAT MOP HEAD - SCREWTYPE
_____	_____	5 GAL	STRIPPER BUCKEYE WAX
_____	_____		OTHER: _____
_____	_____		_____
_____	_____		_____
_____	_____		_____

**MISCELLANEOUS SUPPLIES**

_____	_____		CHALK, WHITE
_____	_____		CHALK, YELLOW
_____	_____		CHALKBOARD CLEANER, WATER BASED
_____	_____		CHALKBOARD ERASERS
_____	_____		PENCIL SHARPENERS -- BOSTON L
_____	_____		OTHER: _____
_____	_____		_____
_____	_____		_____
_____	_____		_____

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\_\_\_\_\_  
Signature of Principal

\_\_\_\_\_  
Received By

\_\_\_\_\_  
Date