

San Diego Unified School District
Supply Request Form
Early Childhood Education Teacher. GIVE FORM TO SITE RN

Name of Requestor: _____ Date: _____ Site: _____

RUSH ORDER YES: NO COMPANY/VENDOR: SCHOOL HEALTH

Item #	Description	Budget Resource	Account #	Item Cost	Quantity	Total Cost
37207	Jack Frost Gel Packs, 4-1/2" x 7" each			1.59		
28494	Adhesive tape/roll			2.72		
21152	Gloves large latex free/box			11.04		
36297	Tweezers slant/each			2.50		
36222	Lister bandage scissors/each			2.38		
27371	Dukal Non sterile Gauge/box			3.57		
21289	Digital thermometer sheath/box			3.57		
13101	Digital thermometers/each			7.80		
49251	Sterile alcohol pads/box			2.97		
49151	Benzalkonium Chloride wipes/box			1.76		
27090	Gauze bandages/each			1.62		
27030	Sterile pads 4 x 4 inch/Box			7.25		
32120	Bandages 2 x 3			6.50		
32005	Bandages 3/4 x 3			3.50		
Additional Information:				Page Total:		
BUDGET CODE:						

Justification: REPLENISH FIRST AID SUPPLIES for classroom

Teacher Signature: _____

Nurse Signature : _____

Your site has been provided funds to purchase First Aid supplies for your classroom. Please provide the site nurse with your request for needed supplies. Thank you.

Janet C Nicol RN, BSN, PHN