## LITTLE LAKE CITY SCHOOL DISTRICT Request for Contracted Services

Purchase Requisition Number						
Contractor Business Name:						
Contact Name:						
Address:						
Phone: Email:						
Dates or school year:						

The contractor will provide the following services (Please be specific. This information should also be included in the Header of the Purchase Requisition):

Provide a description of the Contractor's background:

Will the	e Contractor	work directly	y with or	r near	students	unsuperv	ised?
Yes	🔿 No						

Location services will be provided:	
Cost for services:	
Additional expenses:	
(Mileage, hotel, photocopying, etc.)	
Funding Source:	
	(Fund and Resource Name)
Requested Board Meeting Date:	(Please Review Contract Calendar)
Administrator Signature:	Date: