

**PINELLAS COUNTY SCHOOLS
TELECOMMUNICATIONS REQUEST**

301 Fourth St. SW
Largo, FL 33770

County use only CPA CPDL CRS Database TM ACCT

Date Processed _____ | School Year _____ | Tel. Request # _____

Do not fill in - County use only

*Date _____ *School or Facility _____ *Dept. or Program _____ *Street Address _____ *City, State, Zip _____ *School or Facility Main Phone _____	*Billing Address (if different) _____ _____ _____ _____
*Contact Person _____	*Telephone Number (Ext) _____
*JUSTIFICATION OF REQUIRED SERVICE	
*DESCRIPTION of ORDER (Be specific)	

County use only

**PLEASE CALL THE CLOSE OUT
VOICE BOX WHEN THE JOB IS
COMPLETED. THIS IS IMPORTANT!
(727) 588-6458. THANK YOU**

*SOURCE OF FUNDING

__ Dept/Project to pay __ Monthly __ Install	__ Facility to pay __ Monthly __ Install	__ County Budget __ Monthly __ Install __ Survey	__ Federal funds __ Monthly __ Install
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FUND	GENERAL LEDGER	FUNCTION	OBJECT	COST CENTER	PROJECT	SUB PROJECT	PROGRAM	AMOUNT

*Approved _____
Principal/Administrative Department Head Date

*Approved _____ *Approved _____
Department/Supervisor Date Telecommunications Date

Keep one copy for your records.

**Originator must complete all *
areas for form to be processed.**