

**PINELLAS COUNTY SCHOOLS
TELECOMMUNICATIONS REQUEST**

301 Fourth St. SW
Largo, FL 33770

County use only

<input type="checkbox"/> Axxess Backup	<input type="checkbox"/> CPA
<input type="checkbox"/> Quicken	<input type="checkbox"/> Outlook
<input type="checkbox"/> BA Budget/Telecom	<input type="checkbox"/> Email/Pager
<input type="checkbox"/> Database	<input type="checkbox"/> BB Server
<input type="checkbox"/> Accounting	<input type="checkbox"/> Serv Desk

County use only

P.O. #: _____
P.O. #: _____
P.O. #: _____
P.O. #: _____

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

Facility to pay

County Budget

Federal funds

Monthly Install

Monthly Install

Monthly Install Survey

Monthly Install

FUND	GENERAL LEDGER	FUNCTION	OBJECT	COST CENTER	PROJECT	SUB PROJECT	PROGRAM	AMOUNT

*Approved _____
Principal/Administrative Department Head Date

*Approved _____
Department/Supervisor Date

*Approved _____
Telecommunications Date

Keep one copy for your records.

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