

OFFICE OF CHRISTINE LIZARDI FRAZIER
KERN COUNTY SUPERINTENDENT OF SCHOOLS
Advocates for Children

Form for Budget Development Use Only

BIDDABLE EQUIPMENT REQUEST # 1:

Please list on this form requests for equipment that has a value of \$2,500.00 or more.

Total estimated Equipment Cost (including sales tax and shipping and handling) \$ _____

New _____ Replacement _____ Date Equipment Needs to Be Put Into Service: _____

Program Name and Number: _____

Description of Equipment:

Justification of Purchase: (Explain why this particular piece of equipment is essential to the successful operation of your division.)

BIDDABLE EQUIPMENT REQUEST # 2:

Please list on this form requests for equipment that has a value of \$2,500.00 or more.

Total estimated Equipment Cost (including sales tax and shipping and handling) \$ _____

New _____ Replacement _____ Date Equipment Needs to Be Put Into Service: _____

Program Name and Number: _____

Description of Equipment:

Justification of Purchase: (Explain why this particular piece of equipment is essential to the successful operation of your division.)

STRATEGIC PLAN: Goal 4, Objective 1, Strategy 1

Action 3: Identify equipment needs, surpluses and equipment available for multi-department use.

Action 4: Identify services and staff available for multi-department use.