

**Western New York Regional Information Center
Web Computer/Printer Supply System**

Authorization to Purchase Information Sheet

School District Name: _____

Authorized Purchasers Name: _____

E-Mail Address: _____

Requested Password: _____

User ID (No Numbers): _____

*Please Call Elizabeth Lipp (821-7284) for help with choosing your Password/User ID.

Address to which most orders will be sent to:

Purchasers Phone Number: _____ Fax: _____

Purchasers Signature

Date

I authorize this individual to purchase Computer/Printer Supplies using the WNYRIC Web System up to a maximum of \$_____.

School District Superintendent Signature

Date

Please return this completed form to WNYRIC (CIS) Fax # (716) 821-7394

Any Questions Phone: Elizabeth Lipp 821-7284
Warren Ristine 821-7149

