

**Textbook Orders**

**Pawtucket School Department**

<span style="border: 1px solid black; border-radius: 50%; padding: 2px 10px;">Regular Education Form</span>	<span style="border: 1px solid black; border-radius: 50%; padding: 2px 10px;">Special Education Form</span>
Publisher: _____	School: _____
Address: _____	Order Date: _____
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<b>Bill to:</b> Pawtucket School Department Edward J. Creamer Administration Building PO Box 388 Park Place Pawtucket, RI 02862  Tel (401) 729-6300 Fax (401) 727-1641  <b>Principal Signature:</b> _____	<b>Ship to:</b> William E. Tolman High School 150 Exchange Street Pawtucket, RI 02860 401-729-6400  C/O  <b>DO NOT SHIP BEFORE:</b> <b>BOOKS MUST BE RCV'D</b> <b>NO LATER THAN</b> _____
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ITEM # \_\_\_\_\_

Catalog # _____		ISBN # _____
Textbook Title _____		_____
Grade /Level: _____	Copyright Year: _____	_____
Author: _____		_____
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