

# COVID-19 CLASSROOM REPLENISHMENT FORM

## SPRING 2021

### Location where supplies are needed:

Date: \_\_\_\_\_

Building: \_\_\_\_\_

Classroom #: \_\_\_\_\_

Classroom Level: \_\_\_\_\_  
(100 or 200)

### Requestor:

Name: \_\_\_\_\_

Phone: \_\_\_\_\_

E-mail: \_\_\_\_\_

### Supplies:

Disinfectant Wipes (Buckets)

\*quantities based on class size as provided by  
the Office of the University Registrar

Qty: \_\_\_\_\_

**SUBMIT**

**Facilities Work Management Center**

FMCNotify@fmc.sc.edu | 803.777.9675 | sc.edu/facilities

**For Office/Department Supplies, please visit the Purchasing website:**

[go.sc.edu/Department\\_Purchasing\\_COVID](https://go.sc.edu/Department_Purchasing_COVID)