L-0620

PURCHASE REQUISITION FOR SUPPLIES, SERVICES AND/OR EQUIPMENT

Requisition #:_____

Suggested source of supply:

Name _____

Street _____

City, State, Zip _____

Fein #: _____

Date Needed _____

Deliver to Bldg _____

Room _____

Vendor # _____

Acct. Code: _____

Date: _____

Requested By _____

Approved By: _____

Dept. _____

f.o.b. Terms Price Source & Date Quotation (Attach all written quotes) Contract Bulletin

Catalog Page No	Quantity	Unit	Catalog No.	Description, Including brand, size, color	Unit Price	Total	Code
						0.00	
						0.00	
						0.00	
						0.00	
						0.00	
						0.00	
						0.00	
						0.00	
						0.00	

** Code Indicate by

1. Consumable Supplies
2. Repairs
3. Replacement
4. Equipment
5. Other _____
6. Minority Vendor

Total: 0.00

Purchasing _____