



PURCHASE REQUISITION

REQUISITION NO. R 03713 (This is not a purchase order)

PO # _____

Vendor No. _____ SUGGESTED VENDOR IF KNOWN

ATTN. OF _____

PHONE # _____ FAX # _____

SHIP TO: CENTER _____ ATTN: _____ TEL # () _____ DEPT. _____ BLDG. _____ E-MAIL _____ ADDRESS _____

REQUESTED BY APPROVED BY (DEPT. HEAD) INSURANCE DATE OF REQ. SPECIFY DATE WANTED CHARTFIELD (18 digits)

Table with columns: QUANTITY, DESCRIPTION and CATALOG NO., UNIT PRICE, TOTALS. Includes a large diagonal 'SAMPLE' watermark.

AUTHORIZED CAMPUS APPROVAL REV. 01/12

PURCHASING COPY

UNIVERSITY BUDGET APPROVAL F1500