

## **GENERAL REQUISITION**

<b>∨</b> #:					PURCHASE ORDER #	:			
Vendor:					Date:				
Address					DEPT. ORDERING:				
CITY/STATE/ZIP					For (Individual):				
					DATE REQUIRED:				
□ M.	ISTRUCTIONS: AIL PURCHASE (	Order			ORDER TO BE PREPAID				
_		URCHASE ORDE			MAIL TO CONFIRM ORDER				
		NSTRUCTIONS (E OVER \$5,000, AT							
QUANTITY	STOCK NO.	DESCRIPTION		BID3.			*UNIT PRICE	Amount	
QUANTIT	<b>0</b> 100K <b>11</b> 0.	DESCRIPTION					UNIT I RICL	AMOUNT	
Account Fund	ING DISTRIBU			D CORRECTLY. PROGRAM	Αςτινιτγ	LOCAT		Amount	
TOND				TROGRAM	Activiti				
AUTHORIZ	ED SIGNATURE	s:							
REQUEST	DR:				Da	TE:			
BUDGET N	IANAGER:	Date:							
SECOND APPROVER:									
CONTROLLER:					Da				
INSTRUCTIONS:		TER COMPLETING STRUCTIONS. YOU	THIS FORM, APF I WILL RECEIVE	PLY YOUR DIGITAL SIGNAN EMAIL WHEN A PI	GNATURE AND FOLLOW T JRCHASE ORDER HAS BE	HE DIGITAL PR			

\* NOTE TO PERSON MAKING REQUEST: PLEASE ENTER THE UNIT PRICE FOR EACH ITEM AND INDICATE BY CODE NUMBER THE SOURCE OF THE

 $\mathsf{UNIT}\;\mathsf{PRICE},\,\mathsf{1}.\;\mathsf{ESTIMATE},\,\mathsf{2}.\;\mathsf{CATALOG},\,\mathsf{3}.\;\mathsf{VERBAL}\;\mathsf{QUOTE}\;\mathsf{BY}\;\mathsf{VENDOR},\,\mathsf{OR}\;\mathsf{4}.\;\mathsf{OTHER},\,\mathsf{PLEASE}\;\mathsf{EXPLAIN}$