

Date:	Need by:
Prepared by:	
Department Name:	

Procurement Use Only
DATE RECEIVED:
PURCHASE ORDER #:



PURCHASE REQUISITION

Send **one (1)** copy to Purchasing with supporting documentation. If a grant is being charged, please send to Budgets & Contracts first.

Supplier:	DELIVER ORDER TO:	
Address:	Campus (East or West):	
	Contact Name:	
	Department:	
Contact Info:	Building/Room #:	
	Phone #:	

BUDGETS TO BE CHARGED

Account	Fund	Department	Program	Class	Project	Amount	%

PURPOSE OF ORDER:

Paper requests are required to have two approvals. All supporting documentation must be attached to the requisition. Technology purchases require Electronic Data Processing (EDP) approval forms.

DO NOT PLACE AN ORDER OR OBLIGATE FUNDS WITHOUT A VALID PURCHASE ORDER NUMBER FROM PURCHASING.

Item No.	Description	Quantity & Unit	Unit Price	Total Price
Attach a second page if necessary. <i>(if applicable)</i> Enter TOTAL from second page:				Grand Total

Initial Approver: _____ (Required) **Date:** _____

Approver: _____ (Required) **Date:** _____