ORDER No. # PURCHASE REQUISITION **PURCH. REQ. No.**

DEPARTMENT_____DELIVER TO ROOM No._____BUILDING_____

RECEIVER_____PHONE No._____

DEPT. REQ. No._____DATE REQUESTED_____

SUGGESTED SOURCES_____

VENDOR_____

ITEM No.	DESCRIPTION (GIVE COMPLETE SPECIFICATIONS AND PERTINENT INFORMATION)	QUANTITY	UNIT	UNIT PRICE	TOTAL

	EXPENDITURE CODES			
PURCHASE ORDER No.	FUND	DEPARTMENT	PROJECT	ESTIMATED AMOUNT

INK SIGNATURE OF DEPT. HEAD_____DATE_____

Revised 04/28/2020