

Figure V.H.5 – Purchase Requisition Form

SAMPLE ORGANIZATION - PURCHASE REQUEST

VENDOR NAME: _____
 (If A New Vendor Complete All Blanks This Side)

ADDRESS: _____

CITY & STATE: _____

ZIP: _____

CONTACT: _____

PHONE: _____

FAX: _____

E-MAIL: _____

TYPE OF SERVICE: _____

OR TYPE OF SUPPLIES: _____

OUR ACCT # WITH VENDOR: _____

VENDOR FEDERAL I.D. #: _____

OR SOCIAL SECURITY #: _____

REQUISITION DATE: _____

NEED BY DATE: _____

LATEST DATE ACCEPTABLE: _____

PERSONAL OR BUSINESS (circle one)

SHIPPING ADDRESS: (circle one) STATION OR RANCH

SPECIAL INSTRUCTIONS: _____

SHIP VIA: (circle one)

FED X UPS US MAIL TRUCK

P.I. OR DEPT HEAD: _____

REQUESTED BY: _____

VENDORS REFERENCE #: _____

SPECIAL DISCOUNT TERMS: _____

PAYMENT METHOD: (circle one) Open Charge Check AMEX VISA

COST CENTER	ACCT #	DESCRIPTION	QTY	UNIT MEASURE	PRICE EACH	VENDOR DESCRIPTION OR PART NUMBER	TOTAL PRICE

THIS ORDER WAS PHONED (FAXED) IN ON: _____

_____ Approval

_____ Date