



# Requisition for Purchase Order

VENDOR		DELIVERY SITE	
Firm		Facility	
Attention		Address	
Address		Community	
Town/State/Zip		Town/State/Zip	
Telephone Number		Attention	
Tax ID Number		Telephone	

Quantity	Items (s)	Description	Make/Model/ Catalog Number	Cost Each	Total Cost
Notes				SUB-TOTAL	
				TAX 7%	
				SHIPPING	
				<b>TOTAL</b>	

	<i>If Applicable – Cost Quotes (Bid Folder) Enclosed (Copy To Be Attached To Purchase Order)</i>
	<i>If Applicable – Selected Vendor Cost Quote Attached</i>

SUBMITTED BY		APPROVED BY	
Program		Program Director/Date	
Project		Finance Director/Bookkeeper/Date	
Staff Person		Executive Director/Date	
Date		Property Officer/Date	