

REQUISITION TO PURCHASE					
Date:				Approver:	
Page:	1/1			Flexcode:	
Originator:				Project # (if applicable):	
Department:					
Sub Dept:					
No.	Item Description	Qty.	Unit Price	Extended Total	Vendor Information
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					
Grand Total					
			Ship To		
PO Requisition Name:			Ship to location:		
PO Req Description:					
Quote/Customer #:			Ship to name:		
			Asset "model" info:		
(for items over \$5000 each, list contact person if different from ship to)					
To Be Completed by IT Business Center:					
Req. #:			PO# or Pcard Holder:		
Commodity:					
Dept. ID:					
Fund Code:			Source of Funds:		
Program Code:			Project #:		
Flex Code:					
Budget Ref:					
GL Account:					