

PURCHASE REQUISITION

Not valid without Purchase Order number

PAGE ____ OF ____

DATE

REQUESTOR

PHONE / EXT.

CHARGE TO DEPARTMENT

DELIVERY REQUIRED

P.O. NUMBER

SUPPLIER			SHIP TO			IN-PLANT DESTINATION		
						TERMS		
						F.O.B. <input type="checkbox"/> DEST. <input type="checkbox"/> SHIPPING POINT <input type="checkbox"/> COLLECT <input type="checkbox"/> PREPAID + ADD		
			CONTACT			CARRIER		

ITEM #	ACCOUNT	PART NUMBER	DESCRIPTION		DEL. DATE	QUANTITY	TAXABLE	PRICE / UNIT	LINE TOTAL

PROJECT NAME AND/OR NUMBER

DEPT. APPROVAL

ACCTG. APPROVAL

PURCH. APPROVAL

P.O. DATE

SUBTOTAL

SPECIAL INSTRUCTIONS

TAX

FREIGHT

TOTAL