Purchase Requisition (This is not an Order)

** Please Type or Print Legibly **

Г11	Suggested	Vendor(s):				[2] Ship To:				
[1] Suggested Vendor(s): (Vendor number, name, address, phone number, contact)						[2] Omp 10.		Berea College		
(vendor number, name, address, phone number, condect)							Dept:			
							Bldg/Room:			
							CPO Box:			
					_		CI O Box.	<u> </u>		
							ATTN:			
					_		i none.			
[3] Requested By: [4] Phone Number: [5]					[5] I	Date: (mm-dd-yy)		[6] Deliver By: (mm-	-dd-yy)	
[1]						, , , , , , , , , , , , , , , , , , , ,				
Items have been ordered within the last 12 months.										
Material Safety Data Sheet(s) (MSDS) required.										
	This is a	one-time or in			e time:	s/year) vendor.				
[7]	Quantity &	: U/M:	[8] Descri	iption:				[9] Unit	[10] Extension	
	Qty	U/M						Price		
						Shipping	& Handling:			
		_								
		ons for Requis					-	ISITION TOTAL		
								ms – must notify I	S&S	
_	[] Involves building/grounds modification, remodel, or demolition – must notify FM									
[] Involves installation or assembly of new equipment – must notify FM & EHS										
[] Involves the purchase and/or disposal of chemicals – must notify EHS										
[] Involves access to building/grounds or impacts security – must notify Public Safety										
					nt: [13] Authorized Signature:			[14] Date: (mm-dd-yy)		
	Fund	Orgn	Account	\$ \$\$	%	1				
									 	
ı			1	1	1	1			•	