

## PURCHASE REQUISITION

From: \_\_\_\_\_ (Account Name and Number) \_\_\_\_\_ (Date)

To: **Student Cooperative Assn. Business Office, Hadley Union Building**  
Please order the below listed items from:

Name: \_\_\_\_\_ Federal Identification Number or Social Security Number No.\* \_\_\_\_\_

Address: \_\_\_\_\_ \*(To be filled in if the vendor is providing a service or rental and is not incorporated)

City and State: \_\_\_\_\_ Zip: \_\_\_\_\_

Deliver to: \_\_\_\_\_ Delivery is needed by: \_\_\_\_\_  
Name Building Address

Please answer the following questions:

Yes No

Is the merchandise to be picked up? \_\_\_\_\_

Is this a confirming order? (Co-op approval required) \_\_\_\_\_

Are there materials to be attached to the Purchase Order? \_\_\_\_\_

Do you wish to hand carry purchase order? \_\_\_\_\_

**(For Office Use Only)**

Account No. \_\_\_\_\_

P.O. No. \_\_\_\_\_

\_\_\_\_\_

Please give a brief explanation of the nature and use of goods and services ordered

Event Name: \_\_\_\_\_ Date: \_\_\_\_\_ Location: \_\_\_\_\_

Quantity	Unit	Description (be as detailed as possible)	Unit Price	Total Price
<b>INSTRUCTIONS</b>				<b>TOTAL</b>

1. **Avoid rush orders. Anticipate your needs. Allow time for delivery.**
2. **If purchase exceeds \$5,000 attach evidence of having obtained three or more bids for this request, unless there is only one vendor. We will be glad to obtain bids for you.**
3. **If exact price is unknown, indicate estimate**

\_\_\_\_\_  
Signed: Student Officer

\_\_\_\_\_  
Approved: Advisor