



# General Requisition Form

Use a separate sheet for each supplier.

Name: \_\_\_\_\_ Department: \_\_\_\_\_

Supplier: \_\_\_\_\_ Date: \_\_\_\_\_

Address: \_\_\_\_\_ Phone: \_\_\_\_\_

Website: \_\_\_\_\_ Fax: \_\_\_\_\_

Qty:	Item No:	Model No:	Item Description:	Unit Cost:	Total Cost:
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Note: All equipment will be bid or purchased from NYS contracts. If requisition was prepared from a catalog, please attach catalog photo and complete description.

Please check one box:

- The Items have already been ordered
- I would like the District Office to email/mail the purchase order to the vendor
- I would like a copy of the purchase order so I can place the order myself

For official use only: PO #:  Approved Principal:  Purchasing Agent/Superintendent:  Budget Code:
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Amount: \$ \_\_\_\_\_

Shipping: \_\_\_\_\_

Total: \_\_\_\_\_

Signature of Requisitioner: \_\_\_\_\_