



Purchase Requisition

Date: _____ Requested By: _____ Extension: _____

Suggested Vendor:

Name: _____

Address: _____

City, State, Zip: _____

Cost Center Number & Cost Center Name

Cost Center Manager Signatures

| FOB | Terms | Delivery | Reference or Quote | Inquiry # | Contract # |
|-----|-------|----------|--------------------|-----------|------------|
| | | | | | |

| QTY | UNIT | DESCRIPTION Brand, Size, Model, & Stock # | NIGP CODE | UNIT PRICE | TOTAL |
|-----|------|--|--------------|---------------|-------|
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |

**Grand
Total** _____

Please Print on Green Paper

Purchase Requisitions that consist of more than five lines must be itemized on an attached sheet of paper.

Purchasing **Date**
 Laura Gregory, Purchasing Agent, Extension 8383

Please Print On Green Paper!

Simplified Bidding Record

(Purchases over \$5,000 through \$25,000)

Instructions: Use this form to document transactions over \$5,000 through \$25,000 and attach to purchase order file copy. Generic specifications should be used when possible. If it is necessary to use a brand name to identify a level of quality, vendors must be informed that equivalent alternatives may be acceptable. The agency will be the sole determinator of equivalency. Alternate bids should be indicated. Successful bidder should be circled. Reasons for rejecting any bids should be noted. If a waiver of bidding is approved, indicate reasons.

Code type to be used: **MBE=Minority Business Enterprise (Certified) **WC**= Work Center (Certified)

| | | |
|---------------------------------|----------------------------|----------------|
| Date (mm/dd/ccyy) | Agency/Requisitioning Unit | |
| Person Completing | | |
| Requisition or Reference Number | | |
| Method of Bidding | Written Quote | Phone / Verbal |
| Price Lists | | |
| Other (specify) | | |

| Item Number, Description | Q U A N T I T Y | Vendor Name | | Code Type | | Vendor Name | | Code Type | | Vendor Name | | Code Type | |
|--|--------------------------------------|-------------|-------|------------|---------|-------------|-------|------------|-------|-------------|---------|------------|-------|
| | | Phone | | | Phone | | | Phone | | | Phone | | |
| | | FEIN*** | | | FEIN*** | | | FEIN*** | | | FEIN*** | | |
| | | Unit Price | Total | Unit Price | Total | Unit Price | Total | Unit Price | Total | Unit Price | Total | Unit Price | Total |
| ***FEIN (Federal Employer Identification Number) or Social Security Number (if no FEIN) | | | | | | | | | | | | | |
| Contact Person | | | | | | | | | | | | | |
| Contact Date (mm/dd/ccyy) | | | | | | | | | | | | | |
| Reply Date (mm/dd/ccyy) | | | | | | | | | | | | | |
| Terms | | | | | | | | | | | | | |
| Freight F.O.B. | | | | | | | | | | | | | |
| Delivery | | | | | | | | | | | | | |
| Additional information (note the following as appropriate: bids rejected and why; preferences exercised; explain reason if less than 3 vendors were contacted; justify waiver of bidding): | | | | | | | | | | | | | |

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