



**ELECTRONIC REQUISITION FORM**

(use the <tab> key to navigate from field to field)

Date:

Date Req'd:

(dd-mm-yyyy)

Requested by:

Department:

Authorization:

Confirm Pricing Prior to Order: Yes  No

Suggested Supplier:

Purchase Order Number:

Ref:

| Product Number/Description |        |           | Qty to Order | Cost per Unit (\$) | Extension (\$) | Expense Code / Work Order |
|----------------------------|--------|-----------|--------------|--------------------|----------------|---------------------------|
|                            |        |           |              |                    |                |                           |
|                            |        |           |              |                    |                |                           |
|                            |        |           |              |                    |                |                           |
|                            |        |           |              |                    |                |                           |
|                            |        |           |              |                    |                |                           |
|                            |        |           |              |                    |                |                           |
|                            |        |           |              |                    |                |                           |
|                            |        |           |              |                    |                |                           |
|                            |        |           |              |                    |                |                           |
| Lead Time                  | F.O.B. | Del. Cost |              | Sub. Total         | H.S.T.         | Total                     |

Issued by: \_\_\_\_\_ Received by: \_\_\_\_\_ Date: \_\_\_\_\_