NEW FORM

To avoid invalid Requisition Numbers DO NOT Bookmark or save this form as a Favorite.

AUBURN UNIVERSITY

PURCHASE REQUISITION

ATTACH ALL WRITTEN QUOTATION OR CONTRACTS

PURCHASE ORDER NO.	REQUISITION NUMBER
	undefin

NAMES AND ADDRESSES OF VENDORS PREFERRED

VENDOR#	VENDOR#	VENDOR#

Deliver to	Account #	Subcode	Percent	Amount
NAME:				
DEPT:				
BLDG / ROOM:				
CITY / STATE / ZIP:				
PHONE:				
DEPT. COPY OF P.O. TO:				
DATE NEEDED:				

COMMENTS TO BUYER:

QTY	UNIT	UNIT PRICE	Each item has four description lines. DESCRIPTION Use the TAB key to skip to the next line.

PREPARED BY	EXT#	OTHER APPROVALS:	DATE:	SUBTOTAL:
				$0.00

SIGNATURE - DEPT. / ADMINISTRATIVE HEAD:	DATE:	SIGNATURE - DEAN / VICE-PRESIDENT	DATE:

CONTINUE Click CONTINUE, if you need to enter more data for this PR. You will be prompted to print this form first.*

NEW FORM Click NEW FORM, if you have completed this PR and want a new PR form. You will be prompted to print this form first.*

EXIT Click EXIT, if you want to exit PR form processing. You will be prompted to print this form first.*

* If you have already printed the form, you may click "Cancel" when prompted to print.