

Req. #

Purchase Requisition

Requisition Date

Supplier		Address					
City	State	Zip Code		Social Sec # or Fed ID #	<u>.</u>		
Phone #	Fax #		<u> </u>				
Ship to Address		Payment Terms:					
SUNY Canton, 34 Cornell Drive		Freight Due		Project	Task	Award	
Organization Name (Department)		Carrier FOB Destination	on FCA Origi	in Expend	Expenditure Type		
Building	Room Number						
		Supplier Notes:		360-VP Strategic Rela			
Attention				Organization N	Vame (Departme	ent)	
Need by Date:				Requisitioner	7	Γelephone #	
		Confirming (Yes/No))	Authorized Signature	:	Date	
		•		<u> </u>			

	Item	Item				
Type	Category	Catalog # & Complete Description (including notes & buyer notes)	Quantity	Unit	Unit Price	Total
					1250	0
						0
						0
						0
						0
						0
						0
						0
						0
						0
						0
						0
						0
						0

Quotation: ___ Written ___ Verbal By Date Total: ___ 0