



Purchasing Department
 1000 Holt Ave. - 2714
 Winter Park, FL. 32789-4499
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 purchasing@listserv.rollins.edu

Purchase Requisition

For College Use Only - Not a Valid Contract

Date:

Dept: Box:

Contact Person:

Phone:

Fax:

Department Approval: _____

PO No.

Blanket PO No.

Vendor No.

Vendor Name
 Address
 Phone
 Fax

Budget #: _____

Type of Order:

Special Instructions:

Delivery Date Required:

Deliver to Building/Room:

Ship by:

Ship to:

Catalog No.	Description (Attach Specification or Proposals from vendors)	Quantity	Unit Price	Total
Grand Total:				<input type="text"/>

Purchasing Approval _____ **Received By** _____ **Date** _____