

SMU

PURCHASE REQUISITION

Check if new vendor or new location.

Check for Grants and complete "Attachment A"

For Procurement
Services Only -
PO#>>>

Vendor Information	Requestor Information
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Company Name	Requestor Name
Street Address	Requestor Department
City/State/Zip	E-Mail Phone
Vendor Contact	SHIP TO Department
Vendor Phone	Ship to Contact
Vendor Fax	Street Address
Vendor E-Mail	Building Room #

Account Distribution Info		
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Account	Fund	Org	
			BILL TO Department
Subclass	Project/Grant		PO Box
			City/State/Zip

ORDER INFORMATION
Note: The "Description" column/space is set up to enlarge and wrap text for longer descriptions

QTY	UOM	DESCRIPTION	Unit Price	Extended

For Use By Asset Management, and Grants & Contract	This Page Total >
For Capital Asset Purchase Only (unit price under \$5000):	Grand Total (all pages) >
Location (Bldg & Room #) >	Requested For >
CHECK for Component >	Approved By >
Department >	Title >
Identify Assembly >	Comments >
For Sponsored Projects:	
Sponsor Name >	
Award # >	