

INTERNAL PURCHASE REQUISITION

(Use for Purchases when use of Procurement Card is not allowable)

Date	Requester	Phone
Department	E-mail	

Payment Terms:	Freight Terms	Expected Date of Delivery
Vendor ID No.	Requisition Number	

Vendor Information

Ship To

Name	Name
Address	Address
City/St/ZIP	City/St/ZIP

Index (FOPAL)	Account	%	Amount

Index (FOPAL)	Account	%	Amount

Item	Quantity	Unit	Commodity Code	Description	Unit Price	Extended Price
Total						

PURPOSE:

REQUESTER

DATE

DIVISION HEAD/DIRECTOR

DATE

VP/CAMPUS PRESIDENT
(if applicable)

DATE

INSTRUCTIONS: (1) Complete all information where applicable. (2) Requester must obtain necessary signatures. (3) Forward to DACC Business Office representative for data entry. (4) Print copy for your records. (5) DO NOT place an order until approvals have been obtained.

