



DEPARTMENT NUMBER _____ REQUISITION NUMBER _____

REQUEST FOR BIDS

(To be used for purchases of goods and services greater than \$2,000)

Department Name: _____ Date: _____

Account Number: - -

Description of Job: _____

Date Job Needed: _____ Expedite By: _____
(Note if this is an emergency situation)

Suggested Vendors:

NAME	CONTACT	PHONE

Ship To:

Name: _____
Address: _____

Phone #: _____

Specifications: (Attach additional sheets as needed) _____

Business Justification: _____

Requested By: _____ Phone Extension: _____

<u>FOR PURCHASING USE ONLY</u>	<u>APPROVALS</u>
Date Received: _____	<div style="border: 1px solid black; padding: 5px; margin: 0 auto; width: 80%;"> <p>_____ Date</p> <p>Dept. Head/Chairperson or Vice President</p> <p>(To be completed by dept. making request)</p> </div>
<u>ORDER PLACED WITH:</u> P.O. Number: _____	
Vendor #: _____	_____ Date
Vendor Name: _____	Budget Office
Address: _____	_____ Date
Amount: _____	Purchasing Dept.
	_____ Date