Marymount Manhattan College Requisition Form

Purchasing Department

Suggested Supplier (Vendor) Information	Please Issue:
Is this a new vendor? You must provide complete Name and Address	 Purchase Order: Blanket Purchase Order: Change Order: (PO# Required)
Phone: Fax: Email:	 Mail check E-check Please submit with this requisition any pertinent information to be mailed with the check. Label this documentation: "To be mailed with check"

Purpose for requested materials/services and additional requests:

E	Budget Code			Unit	
ХХ	XXXXX XXXXX	Description and Specifications	Quantity	Cost	Total
Date	:	Estimated Shipping and Handling Costs:			
Initia	ated by (sign and ty	po)		Grand Total	

Initiated by (sign and type)	Grand Total:	
Division/Dept Chair (sign and type)] Date:	
Vice President's Approval] Date:	
President's Approval (over \$50,000)	Date:	

-----Do Not Write Below this Line - Purchasing Department Use Only------

Comments: