

NEW MEXICO HIGHLANDS UNIVERSITY PURCHASE REQUISITION
THIS IS NOT A PURCHASE ORDER

P.O. _____

DO NOT WRITE IN BOX BELOW

SUGGESTED VENDOR:

Date _____
Terms (Net 30) _____
Bid/Proposal/SPD/GSA _____
Buyer Approval _____

SHIP TO:

DATE _____
 DEPT. NAME _____
 USER CONTACT _____ EXT _____
 DATE WANTED (REQUIRED) _____
 BLANKET ORDER EFFECTIVE DATES _____ to _____

	FUND	ORGANIZATION	ACCOUNT	PROGRAM	%	\$
ACCOUNT 1						
ACCOUNT 2						
ACCOUNT 3						
ACCOUNT 4						
NO.	QUANTITY	UNIT	COMMODITY DESCRIPTION		UNIT PRICE	TOTAL

FUND SUPERVISOR SIGNATURE (REQUIRED) _____ TOTAL ESTIMATED COST _____

SIGNATURE NAME (TYPED) _____

APPROVALS	DATE	APPROVALS	DATE
_____	_____	_____	_____
COMPLIANCE		PRESIDENT (OVER \$30,000.)	
_____		_____	
FOOD		V P FOR FINANCE AND ADMINISTRATION (OVER \$10,000.)	
_____		_____	

PLEASE ATTACH THE REQUIRED PURPOSE AND JUSTIFICATION MEMO FOR THIS PURCHASE REQUISITION