

PURCHASING: HISTORY ORDER FORM

Vendor Info.

Vendor/Payee Name: _____
 Phone: _____
 Fax: _____
 Email Address: _____
 Mailing Address: _____

Requester Info.

Requester: _____
 Phone: _____
 Email Address: _____
 Date Requested: _____
 Date Needed: _____
 Delivery Address: _____

Purpose of the Order (enter a detailed description of how, what, where, when, and why the tangible goods will be used):

Qty.	Unit/ Size	Description	Unit Price	Total Price

Invoice Number: _____
 Special Instructions/ Comments: _____

Shipping/ Handling _____
 Sub-Total _____
 Tax _____
Total _____

Full Accounting Unit

	Acct	CC	Fund	Project	Sub	Object	Amount
FAU #1	_____	_____	_____	_____	_____	_____	_____
FAU #2	_____	_____	_____	_____	_____	_____	_____
FAU Entered by: _____							

----- Office Use Only -----

Authorized By: _____	Signature _____
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