DEPARTMENTAL REQUISITION

DEPT. RE. NO.

UNIV. ORDER NO.

DATE

CONTRACTOR & SHIPPER	**MATERIAL REQUIRED BY (SHOW DEFINITE DATE)**
ADDRESS	**SUGGESTED SOURCE(S) FOR OPEN MARKET PURCHASES:**
CITY	
THE UNIVERSITY OF TEXAS OF THE PERMIAN BASIN	
DEPARTMENT-DESTINATION OF SUPPLIES AND/OR EQUIPMENT	**VENDOR ID NUMBER**
BUILDING AND ROOM NO.	
ADDRESS	
DESTINATION OF INVOICE IF DIFFERENT FROM ABOVE	DEPARTMENT:

FUND NO.	**ORG. NO.**	**ACCT. NO.**	**PROG. NO.**	**AMOUNT**

ITEM NO.	**ITEM AND DESCRIPTION**	**QUANTITY**	**UNIT**	**UNIT PRICE**	**EXTENSION**

REQUESTED BY _____ **FUNDS AVAILABLE** _____
FOR DIRECTOR OF ACCOUNTING

APPROVED _____ **APPROVED** _____
BUDGET HEAD **FOR PURCHASING AGENT**