REQUESTER: _____

VENDOR _____

BIOLOGICAL SCIENCES REQUISITION FORM

ORDER #:_____

DATE:_____

CATALOG #	DETAILED DESCRIPTION	QTY	UNIT	UNIT COST	TOTAL
					$ 0.00
					$ 0.00
					$ 0.00
					$ 0.00
					$ 0.00
					$ 0.00
					$ 0.00
					$ 0.00
					$ 0.00
					$ 0.00
					$ 0.00
					$ 0.00
					$ 0.00
					$ 0.00
					$ 0.00

FACULTY	
COURSE NUMBER	
RESEARCH (Grant #)	

SPECIAL INSTRUCTIONS:	**S&H:**	
	TOTAL:	$ 0.00

VENDOR: ***Name, Phone, Web site, Address***	

PRICING OBTAINED FROM ***(specify)*** **SOLE SOURCE:** ***If purchase price +2000.00, furnish quotes or names of 2 other vendors.***		**OFFICE USE ONLY:**
Vendor Catalog		**P-CARD INFORMATION**
Number of Catalog		**INVOICE DATE:**
State Contract		**INVOICE AMOUNT:**
(number)		**BANNER ID #:**
		BANNER ID #:
		CHECK DATE:
ODU Contract		**AMOUNT PAID:**
(number)		**P-CARD ACCOUNT USED ON ORDER:**
Est. Pricing Only		**DATE ENTERED ON DEPT LOG:**
OTHER *(specify)*		**BANNER INFORMATION**
		DATE REC'ING REPORT DONE ON BANNER:
		RECING REPORT #:
BUDGET INFO:	**BUDGET CODE:**	**RECING REPORT #:**
	OBJECT CODE:	**DATE ENTERED ON DEPT LOG:**
	VENDOR NO:	

CHAIR"S APPROVAL:	**ORDER PLACED(Initials/date):**	**ORDER # :**
		LPO# :
		DO#:
		SPCC LOG# :
		PURCHASE REQ #: