

Name of Procurement Entity

PROCUREMENT REQUISITION

Page ___ of ___

Procurement Number					
Procurement Entity	Department/Project	Source of Funds	Sequence Number		

Subject of Procurement:		Location/Site:	
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Item No.	Description <i>(A detailed Statement of Requirements or Stock Management Information may be attached)</i>	Quantity	Unit of Measure	Estimated Unit Cost	Estimated Total Cost

Account Code:	Class	Item	Sub Item	Sub-Sub Item	Estimated Total Cost:

Signatures required to certify that (1) the works, services or supplies described are required, (2) Included in the procurement plan, (3) funds are available or budgeted for the requirement, and that (4) approval is granted to proceed with the procurement.

	1. Originating Officer	2. Accounting Department	3. Head of Department/Unit
Signature:	_____	_____	_____
Name:	_____	_____	_____
Position:	_____	_____	_____
Date:	_____	_____	_____

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