

# Purchase Order Attachment Form

Requisition Number: \_\_\_\_\_

VENDOR NAME: \_\_\_\_\_

CAMPUS: \_\_\_\_\_

CONTACT PERSON: \_\_\_\_\_

PHONE: \_\_\_\_\_

Check off instructions that apply to attachment:

\_\_\_\_\_ **To be filed with P. O. in Accounts Payable**

\_\_\_\_\_ **Originator will order**

\_\_\_\_\_ **Registration**

\_\_\_\_\_ **Rush**

\_\_\_\_\_ **If Quotes Always Send 3**

\_\_\_\_\_ **Further Instructions – See Below**

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