



OVER \$5,000 PURCHASE REQUEST AUTHORIZATION FORM

Item(s) to be purchased: _____

Purpose/Project: _____

Account Number(s): _____

Type of Request: _____

Vendor #1

Name: _____ Contact: _____

Address: _____

Quoted Price: _____ Other: _____

Vendor #2

Name: _____ Contact: _____

Address: _____

Quoted Price: _____ Other: _____

Vendor #3

Name: _____ Contact: _____

Address: _____

Quoted Price: _____ Other: _____

Comments: _____
