

# REQUEST TO PURCHASE

SUGGESTED VENDOR: \_\_\_\_\_ CHART OF ACCT. CODE/FUND: \_\_\_\_\_  
 REQUESTOR: \_\_\_\_\_ ACTIVITY CODE: \_\_\_\_\_  
 LOCATION: \_\_\_\_\_ EXP. LINE ITEM: \_\_\_\_\_  
 DATE OF REQUEST: \_\_\_\_\_  
 DATE REQ'D: \_\_\_\_\_

| QTY | UNIT | ITEM NUMBER | DESCRIPTION | COST | TOTAL |
|-----|------|-------------|-------------|------|-------|
|     |      |             |             |      |       |
|     |      |             |             |      |       |
|     |      |             |             |      |       |
|     |      |             |             |      | -     |
|     |      |             |             |      | -     |
|     |      |             |             |      | -     |
|     |      |             |             |      | -     |
|     |      |             |             |      | -     |
|     |      |             |             |      | -     |
|     |      |             |             | -    | -     |
|     |      |             |             | -    | -     |
|     |      |             |             | -    | -     |
|     |      |             |             | -    | -     |
|     |      |             |             | -    | -     |

|   |              |           |          |
|---|--------------|-----------|----------|
| ALL REQUESTS MUST COMPLY WITH THE WIOA PROCUREMENT METHODS. SEE BELOW:<br>SMALL PURCHASES: \$1 TO \$9,999.00: 2 DOCUMENTED QUOTES<br>SOLE SOURCE: MUST BE JUSTIFIED IN WRITING<br>RFP: FOLLOW PROCEDURES IN PROCUREMENT MANUAL<br>NOTE: THE FOLLOWING MUST BE ATTACHED TO THIS FORM: COMPLETED APPLICABLE<br>PROCUREMENT FORM(S), QUOTES, WRITTEN JUSTIFICATION, BIDS, AND OTHER NECESSARY DOCUMENTATION. | Sub-Total    | \$        | -        |
|   | Hotel fees   |           |          |
|   | Tax          | \$        | -        |
|   | Discount     | \$        | -        |
|   | <b>TOTAL</b> | <b>\$</b> | <b>-</b> |

JUSTIFICATION FOR REQUEST:  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

|           |      |                                      |      |
|-----------|------|--------------------------------------|------|
| REQUESTOR | DATE | AUTHORIZED SIGNATURE                 | DATE |
|           |      | *** SIGNATURE AUTHORIZES PURCHASE*** |      |

FOR PROCUREMENT ONLY -DO NOT WRITE BELOW THIS LINE- FOR PROCUREMENT ONLY

RECOMMENDED ACTION: APPROVED \_\_\_\_\_ DENIED \_\_\_\_\_

ACCOUNTING NUMBER: \_\_\_\_\_

COMMENTS: \_\_\_\_\_  
 \_\_\_\_\_

|                       |                             |      |
|-----------------------|-----------------------------|------|
| PURCHASE ORDER NUMBER | FISCAL OFFICE AUTHORIZATION | DATE |
|-----------------------|-----------------------------|------|

Original-Fiscal Office Copy-Make copy for division records