

REQUISITION
Mille Lacs Reservation Purchasing Supply

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|-------------------------|------------------------|
| 1. VENDOR NAME & NUMBER | 2. DATE OF REQUISITION |
|-------------------------|------------------------|

3. DELIVER TO DEPARTMENT OR PROGRAM

4. CHARGE TO DEPARTMENT OR PROGRAM ACCOUNTING CODE

5. REQUESTED BY

6. APPROVED BY

7. BUDGETED LINE ITEM DESCRIPTION

| 8. Quantity | 9. Unit | 10. Cataglog Number | 11. Page | 12. Full Description | 13. Unit Price | 14. Total Price |
|-------------|---------|---------------------|----------|---------------------------|----------------|-----------------|
| | | | | | | |
| | | | | 15. SHIPPING & HANDLING | | |
| | | | | 16. M.L.R. SALES TAX - 5% | N/A | |
| | | | | 17. TOTAL COST | | |

18. SUGGESTED VENODRS (attach list of additional vendors)

PURCHASING DEPARTMENT USE ONLY

| | |
|--------------|-------------------------------|
| ORDERED FROM | SIGNATURE OF PURCHASING AGENT |
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| | | |
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| PURCHASE ORDER NO. | DATE ORDER PLACED | DATE ORDER COMPLETED |
|--------------------|-------------------|----------------------|