PR0001
Rev. 10/03

NON-STOCK REQUISITION

Purchasing Department
Lincoln Public Schools
Lincoln, Nebraska

Req. No. _____

P.O. No. _____

Submit to:
Purchasing, Box 37

Shipping _____

Discount % _____

Requested by		
Today's Date 03/24/15	**Date Required**	**Approved by**
Account No.		**Location**
Special Instructions		

Quantity	Unit of Measure	Description (Please be specific: size, color, special features, mfg's number, vendor catalog number, brand name)	Unit Cost	Total Estimated Cost
				0.00
				0.00
				0.00
				0.00
				0.00
				0.00
				0.00
				0.00
				0.00
				0.00
				0.00
				0.00
				0.00
		Total		0.00
		Discount		0.00
		Shipping		
		GRAND TOTAL		0.00

Complete Vendor Address

Vendor Code _____

Name

Address

F.O.B.

Delivery

Quote No.

Buyer

Reduce
Reuse
Recycle