B093-2409

## REQUISITION FOR PURCHASE JACKSON STATE COMMUNITY COLLEGE 2046 NORTH PARKWAY JACKSON, TN 38301-3797

VEN #:	
DATE:	
FOAP#:	
OBJECT:	

SUBMIT TO PURCHASING	<u> </u>
VENDOR'S NAME:ADDRESS:	VENDOR CONTACT INFORMATION PHONE:
	FAX <u>:</u>

P/REQ #:\_

ITEM			UNIT	ESTIMATE
NO.	QUANTITY	DESCRIPTION	COST	TOTAL
			<b>T</b> .(.)	
			Total:	

JUSTIFICATION:

AUTHORIZATION					
Requisitioner	Dean				
Department Head	Vice President				
President/Vice-President of Financial and Administrative Affairs					