

REQUISITION INPUT/AUTHORIZATION FORM

REQ#: _____ **PO#:** _____

Prepared by: _____ Date: _____

P50 - REQUISITION HEADER SCREEN

REQ TYPE: _____ BUYER CODE: _____ QUOTE DATE: _____

CONTACT: _____ START DATE: _____

VENDOR: _____ PHONE#: _____ - _____ - _____ FAX#: _____ - _____ - _____

ADDRESS: _____ CITY: _____ STATE: _____ ZIP: _____

ACCT#	PCT	AMT	ACCT#	PCT	AMT
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____

DELIVER TO CODE: _____ REQ TEXT: _____

PICK UP BY: _____

DELIVERY DATE: _____

254 OR 25L - LINE ITEM ENTRY

Line	QTY	UOM	UNIT \$	TRD DISCT	EXTENDED PRICE	UPO
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001	_____	_____	_____	_____	_____	_____
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DESCRIPTION: _# _____

TAX CODE: _____

Line	QTY	UOM	UNIT \$	TRD DISCT	EXTENDED PRICE	UPO
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002	_____	_____	_____	_____	_____	_____
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DESCRIPTION: _# _____

TAX CODE: _____

Line	QTY	UOM	UNIT \$	TRD DISCT	EXTENDED PRICE	UPO
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003	_____	_____	_____	_____	_____	_____
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DESCRIPTION: _# _____

TAX CODE: _____

Line	QTY	UOM	UNIT \$	TRD DISCT	EXTENDED PRICE	UPO
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004	_____	_____	_____	_____	_____	_____
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DESCRIPTION: _# _____

TAX CODE: _____

Line	QTY	UOM	UNIT \$	TRD DISCT	EXTENDED PRICE	UPO
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005	_____	_____	_____	_____	_____	_____
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DESCRIPTION: _# _____

256 - REQUISITION TRAILER SCREEN

REQ SUBTOTAL: _____ TAX: _____ TOTAL: _____

214 OR 252 - REQUISITION APPROVAL SCREENS

DEPT HEAD/DIR. APPROVAL: _____ DATE: _____

ADDITIONAL APPROVAL: _____ DATE: _____