



NMSU Grants Branch

1500 N Third St.
Grants, NM 87020
(505) 287-6653 fax (505) 287-2329

Date _____

PURCHASE REQUISITION

(Not a Purchase Order)

Vendor

Name _____
 Address _____
 City _____ St _____ ZIP _____
 Phone _____
 Fax _____
 Email _____

Ship To

Name _____
 Company NMSU Grants Branch
 Address 1500 N Third Street
 City Grants St NM ZIP 87020
 Phone (505) 287-6653

Quote # _____

Purchased with Pcard
Request to use Pcard

Qty	Units	Description	Item#	Unit Price	TOTAL
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					
11					
12					
13					
14					
15					
16					

For Internal Use Only

SubTotal	
Tax	
Shipping & Handling	
TOTAL	

Vehicle and License # _____

Requested By (Signature) _____

Business Purpose

Index Number

_____ \$ _____
 _____ \$ _____
 _____ \$ _____
 _____ \$ _____

Approval

Approval _____ Date _____
 Approval _____ Date _____
 Approval _____ Date _____
 Approval _____ Date _____

All incomplete purchase requisitions will be returned.

Email the finished Purchase Requisition to:
gr_purchasing@nmsu.edu

Business Office Use Only

Date Entered _____
 Requisition # _____