OCONEE COUNTY REQUISITION

Page # __ of _____

Sections 1, 2 (if applicable) & 3 (if applicable) are to be filled out entirely prior to submitting the requisition to the Procurement Office. Requisitions received without complete information will be returned to the initiating dept for completion.

SECTION 1: GENERAL INFORMATION & DEPT HEAD SIGNATURE

(to be filled out & signed by initiating dept)

DATE: _____ INITIATING DEPT: _____

BUDGET CODE: _____-_____-_____-_____

AMOUNT APPROVED IN BUDGET CODE(S) ABOVE FOR THIS PURCHASE: $_____

Note: You must fill in this section if using any budget code other than operational, small capital, maint on equipment, buildings & grounds.

If your department has purchased this item(s) previously, fill in the previous PO #: _____

DELIVERY INSTRUCTIONS: _____

SECTION 2: OTHER REQUIRED SIGNATURES

_____ IT Dept, Engineer, Communications, etc. as to technical content

_____ Funds Certification by the Finance Office

SECTION 3: GRANTS USE ONLY

NAME OF GRANT: _____

DEADLINE TO SPEND FUNDS: _____

Note: You must fill-in this section if using grant funds or any other funds that have a deadline for issuing a PO.

Are there any special bidding requirements? ☐ yes ☐ no

_____ Grants Administrator

Low bidder's vendor #: _____

BY SIGNING BELOW, I CERTIFY THE FOLLOWING:

The items listed below are needed by this department for the sole use & benefit of Oconee County and have been approved in my budget.

_____ DEPARTMENT HEAD SIGNATURE (or approved designee)

	BIDDER #1	BIDDER #2	BIDDER #3
Company Name			
Person Quoting			
Phone Number			
Fax Number			
Delivery Time			
Notes			

QTY.	Unit of Measure	Description Attach detailed descriptions on a separate page (if applicable)	BIDDER #1 Unit Price	BIDDER #1 TOTAL	BIDDER #2 Unit Price	BIDDER #2 TOTAL	BIDDER #3 Unit Price	BIDDER #3 TOTAL
		Subtotal						
		Subtotal from all continuation pages (if applicable)						
		Freight (if applicable)						
		Sales Tax (6%)						
		GRAND TOTAL						

PROCUREMENT OFFICE USE ONLY:

PO Issued To: _____

Req #: _____ PO #: _____

Ordering Instructions: FAX MAIL DEPT E-MAIL: _____ Copy of PO to : _____