DIUUKIUI University of New York 1146 Boy	<b>1ASE KEQUISITIO</b> lan Hall '18.951.5000x3272 Fax:		il: fbcc@broo	klyp cupy odu		
Lonege Form #BCP	R001 Effective Date: September		Attachments:			
○\$250 and Under ○ Over \$250	Sole Vendor (Attach	letter of justification)	form	(s) please check the	Detail Sheet nal Vendors	
Department Name	OTPS Budget	Charged	Refer que	estions to:	Telephone No.	
Delivery Information:						
Department	ATTN:	Room No.	Building	Requested Delivery Date	Date	

## **Suggested Vendors:**

Company Name	Address	City	State	Zip	Telephone No.	ATTN:
					Fax No.	

To include additional suggested vendors please attach the Additional Suggested Vendors Form.

#	Catalog #	Description	Qty.	Unit	Unit Price	Amount
1						
2						
3						
4						
5						
To include more than five items please attach an OTPS Detail Sheet. In the 'Item Description' field enter: "As per attached OTPS Detail Sheet: Number of Items", in the 'Unit Price' field enter the total amount from the detail sheet. Use one line for each detail sheet attached. Staple all the detail sheets to the requisition. (if applicable)						
Aut	horized Signatu	re:			Total:	

## Special Instructions/Department Tracking/Comments:

State/FAS Coding - For the Office of Purchasing use only. Do not write below this line.

Brooklyn College Requisition No.				Purchase Order Number			Federal ID Number		
Dept	Cost Center	Variable	Fiscal Year	State Object	FAS Optional Coding		Bid Date and Time		