Direct Material Purchase - Vendor Requisition Form

ALL FIELDS ARE REQUIRED

DATE: _____

Project name, number and location

Contractor contact information including e-mail address

Subcontractor contact information including e-mail address

Supplier's Full Business Name, Address, & contact information

Special instructions for delivery and contact person

QTY	DESCRIPTION	UNIT COST	EXTENDED PRICE	SALES TAX	SHIPPING

TOTAL: _____

Contractor Signature (Print & Sign Name) _____ **Date Signed** _____

Project Manager Signature (Print & Sign Name) _____ **Date Signed** _____

Lee Board of County Commissioners – Procurement Management
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