AG-610 (08/12)

Texas A&M AgriLife
Administrative Services – Disbursements

Departmental Purchase Request

☐Texas A&M AgriLife Research ☐Texas A&M AgriLife Extension Service ☐TVMDL

Date Order Placed With the Vendor: _____ ***DOC Number:*** _____ ***Account:*** _____

Requested by: _____ ***Phone:*** _____ ***Dept. Approved:*** _____

Additional accounts/support accounts: (Indicate part 06/07/20/02 and amount or percentage of purchase)

_____

_____

Description	***Quantity***	***Unit***	***Est. Unit Price***	***Extension***
				0.00
				0.00
				0.00
				0.00
				0.00
				0.00
				0.00
				0.00
				0.00
				0.00
				0.00
				0.00
				0.00
Shipping and Handling (Estimated Amount□)				
			Totals:	0.00

From: Phone Quote (per _____); Official Quote; Catalog Order; Other: _____

Suggested Source: (Include Phone and Fax Numbers)

Company: _____ ***Contact:*** _____

Address: _____ ***Phone:*** _____

_____ ***Fax:*** _____

Information required on Purchase Orders (per the State Comptroller's Office 11/2003):
Vendor Name
Date the order is placed with the vendor
Detailed description of items/services ordered (Include quantity of each item; Include unit price of each item)
State whether freight or other charges are to be paid, and the actual amount (if the actual amount is not known, state the estimated amount)