

REQUISITION # \_\_\_\_\_

VENDOR \_\_\_\_\_



## REQUISITION BACK-UP COVER SHEET

Date: \_\_\_\_\_

Requisitioner: \_\_\_\_\_ Ext. \_\_\_\_\_

Comments: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**SEND TO PURCHASING**  
**FAX: (909) 274.2025 or EXT. 2025**  
**e-MAIL: [purchasing@mtsac.edu](mailto:purchasing@mtsac.edu)**

Revised Jan. 29, 2013