COLUMBIA SCIENTIFIC BALLOON FACILITY

INTERNAL PURCHASE REQUISITION FORM

DATE REQUESTED _____ REQUESTOR NAME _____ PHONE _____ DATE REQUIRED _____

COMPANY 1 _____
ADDRESS _____
_____
CONTACT _____
PHONE _____
E-MAIL _____

COMPANY 2 _____
ADDRESS _____
_____
CONTACT _____
PHONE _____
E-MAIL _____

COMPANY 3 _____
ADDRESS _____
_____
CONTACT _____
PHONE _____
E-MAIL _____

APPROVAL PROCESS 25-NBOC
PROCUREMENT TYPE: ADMINISTRATION 25
PROCUREMENT TYPE: NON-FLIGHT 23
PROJECT ABBREVIATION _____
VENDOR NO. _____
PURCHASE REQUEST NO. _____

PR ENTERED BY: _____ DATE: _____ PURCHASE ORDER NUMBER: _____

SPECIFIC PURPOSE (MUST BE COMPLETED)

PROPERTY	ATTACHMENTS	SHIP TO	SHIPPING MEMO	SOLE SOURCE
☐ EVS Required EVS#_____ Initial:_____	☐ Statement of Work ☐ Drawings ☐ Other _____	☐ Palestine ☐ Ft. Sumner ☐ Port Hueneme, CA ☐ Campaign Site: Canada	☐ Yes ☐ No ☐ Repair – RMA#_____ ☐ Calibration ☐ Other_____	☐ Yes ☐ No IF YES, COMPLETE FORM #OSC-007 AND ATTACH TO THIS FORM

LINE ITEM NUMBER	ACCOUNTING CHARGE NUMBER	ACCOUNTING ITEM NUMBER	QTY	UNIT	MFG. OR CATALOG NO. / DESCRIPTION	UNIT PRICE	EXTENSION
	216200.001.			Pack			
	216200.001.			Pack			
	216200.001.			Pack			
	216200.001.			Pack			
	216200.001.			Pack			
	216200.001.			Pack			
	216200.001.			Pack			
	216200.001.			Pack			
	216200.001.			Pack			
	216200.001.			Pack			
					TOTAL		

DEPT. HEAD _____ DATE: _____ SITE MGR. _____ DATE: _____