PIEDMONT TECHNICAL COLLEGE
CAMPUS SHOP REQUISITION

FOR BOOKSTORE USE ONLY - FILL IN ITEMS AS COMPLETELY AS POSSIBLE

REQ # R0       BUYER #_________       DATE_____________
P.O. # B0

DEPARTMENT REQUESTING

Type of Purchase:
- Books
- Supplies
- Videos

DEPT. ACCOUNT NUMBER

Type of Order:
- Regular Order
- Check W/Order
- Confirming Order

VENDOR NUMBER

CUSTOMER ACCOUNT #

VENDOR NAME

ADDRESS

PHONE #

CITY   STATE   ZIP CODE   FAX #

<table>
<thead>
<tr>
<th>QUANTITY</th>
<th>UNIT</th>
<th>DESCRIPTION OF ITEM/catalog number</th>
<th>UNIT PRICE</th>
<th>EXT. AMT.</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

BOOKSTORE USE:  FREIGHT CHARGE

POSTED DATE  CONFIRMATION #  TOTAL AMOUNT

FRS

POS

RECEIVING

NOTE: ORDERS LESS THAN $100 - CHECK REQUEST PROCESSED___________