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| UA-color-left-med | | | | | | | | Purchase Request for Inventory Items  (Used only to purchase items to be added to IT,  Print Shop or Warehouse Inventory) | | | | | | | | | | | | | | | | | | | | | | | PURCH-304  3-24-04 |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | Suggested Vendor(s) (Vendor, address, phone and contact) | | | | | | | | | | | | | | |  | |  | | | | | For Financial Services Use only | | | | | | | | |
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|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| (Attach list of additional sources if needed) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Ship to | |  | | | 1. P.O. Box 391 | |  | | 2. Warehouse | |  | |  | | | | | | | | |  | | | | | | | | | |
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| **(If Information is not Sufficient to make this purchase, request will be returned for Additional Information)** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| **Item/Part #** | | |  | **Description, Size, Color, Catalog No., Author, etc.** | | | | | | | |  | | **Qty.** | | | |  | **Unit** | | | | |  | **Unit Price** | | | |  | **Total** | |
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| Justify need for item | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | |
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| NOTE: Department Heads, Section Leaders and District Directors will approve purchase requests for $1,000 or less. Associate Directors, 4H and FCS State Leaders will approve requests between $1,001 - $ 10,000. The Associate Vice President for Agriculture - Extension or his designee must approve all requests over $10,000. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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|  | | | |  | | | | | | | Recommended | | | | | | | | |  | Yes | | | | |  | No | | | | |
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