

# LIBERTY COUNTY REQUISITION

DEPT: \_\_\_\_\_ DATE: \_\_\_\_\_

Vendor #	Vendor Name	Account #	Amount Requested

DESCRIPTION: \_\_\_\_\_

\_\_\_\_\_ I certify that I am NOT requesting a PO for supplies/services that have already been purchased.

\_\_\_\_\_ If a Blanket PO is being requested, I acknowledge that the Blanket PO will be VOID as of  
the last day of the current month.

Authorized Signature: \_\_\_\_\_

PO # ISSUED: \_\_\_\_\_ ISSUED BY: \_\_\_\_\_

PO NOT ISSUED:

Requisition not signed by authorized employee \_\_\_\_\_

Budget amount not available \_\_\_\_\_

Item already purchased \_\_\_\_\_