Information Technology Requisition

Note: Send request to Information Technology, 5th Regiment Armory, 29th Division Street, Baltimore, MD 21201, Room 6 or email to heimbergerj@mdmildep.org. Please give as much description as possible. All requisition purchases are subject to Maryland procurement laws.

Date_____ Number_____

From: Ship To:

☐Stock ☐Purchase Order ☐Supply ☐Other_____

Requested by/Phone No.	Suggested Vendor Address/ Phone Number:	Purpose:

Financial Data: PCA_____ Obj_____ Fund: 01 %age_____ 03 %age_____ 05 %age_____ 09 %age_____

ITEM	QTY	DESCRIPTION	PRICE	AMOUNT

Replacement of unserviceable like item? Yes No Unserviceable item to be turned in on Date_____

Emergency requisition? Yes No Where will item be utilized? Location_____

Building Number_____ Room Number_____

Program Mgr. Approval	IT Approval	Purchasing Approval
Date_____	Date_____	Date_____
Name_____	Name_____	Name_____
Title_____	Title_____	Title_____
Signature_____	Signature_____	Signature_____

Item received date_____ By_____ Bar Code No._____

Issued to_____ Date_____ By_____