

REQUISITION ATTACHMENTS FORM

This form **must** accompany all attachments

BUSINESS UNIT (circle one): USMPO USMGC USMPP USMST USMFS

REQUISITION # _____

ATTACHMENTS (check all that apply):

- | | |
|---|--|
| <input type="checkbox"/> QUOTE(S) | <input type="checkbox"/> COPY OF ADVERTISING/PRINTING |
| <input type="checkbox"/> INVOICE(S) | <input type="checkbox"/> INSERTION ORDER (advertising) |
| <input type="checkbox"/> SPECIFICATIONS | <input type="checkbox"/> PROOFREADING/GRAPHICS REVIEW |
| <input type="checkbox"/> ORDER FORM | <input type="checkbox"/> SOLE SOURCE LETTER |
| <input type="checkbox"/> W-9 FORM | <input type="checkbox"/> VENDOR REGISTRATION FORM |
| <input type="checkbox"/> CONTRACT | <input type="checkbox"/> PERSONAL SERVICES CONTRACT |
| <input type="checkbox"/> OTHER | <input type="checkbox"/> GOODS RCVD/SVCS RNDRD LETTER |
| <input type="checkbox"/> SIGNATURE SHEET (multiple signatures required - attach copy of requisition with all relevant signatures) | |

DEPARTMENT CONTACT

NAME _____ Phone _____

VP OR BUDGET AUTHORITY (if required) _____