

SMG

Purchase Requisition

Account No	Cost Center For Accounting Use Only	Event Number

Building: LSED-BABY CAKES STADIUM

Date Requested: 12/05/18

Requestor's Name: Jose' Avila

When Needed: _____

Requestor's Dept: Operations

Customer Pick Up Delivery

Item Number	Item or Service Description (Detailed to Spec)	Quantity	Unit of Measure	Price	Extension
	Rigid K400 115V 3/8" x 75' C32 IW with T260 tool set	1.00	EA		\$ -
					\$ -
					\$ -
					\$ -
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					\$ -
					\$ -
					\$ -
					\$ -
					\$ -
					\$ -
					\$ -
Total					\$ -

Purpose or use: Plumbing/Drainage

Reason: Drain snake for drainage issues

Special Instructions: _____

Capital Project # _____

ORDER PLACED BY **Date Ordered**

Potential Vendor Name _____

Is your company registered as a Disadvantaged Business Enterprise vendor? If YES, please provide your DBE Certification # in the space provided. YES
 NO

DBE Certification # _____

Contact _____

Address _____

City, State, and Zip Code _____

Fax _____

Phone _____

Email address _____

Equity Liaison Officer **Date**

P.O./Contract number assigned:

(Purchasing to complete)

Approval: _____
Manager Signature Date

Approval: _____
Department Head Signature Date

Approval: David Weidler
Director of Finance Signature Date

Approval: Alan Freeman
General Mgr *Combined total over \$5,000.00 Signature Date

Approval: Doug Thornton
Regional VP *Projects with Combined Total Over \$5,000 *All LSED Administrative Expenses Signature Date

Approval: Kyle France
LSED Board Chairman Signature Date