



MSU Moorhead Purchasing Card Purchase Requisition

Requested By: _____

Date _____

Approved By : _____

Date _____

(Budget Supervisor or
Appropriate Administrator)

Sufficient funds are available for this purchase.

Cost Center #: _____

Item	Quantity	Item Requested	Unit Price	Total
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Vendor _____

Date of Request: _____

Address: _____

City/State _____

Phone: _____

Purchasing VISA Card Assigned to: _____

Processed By: _____

Date: _____