

Tulane

Requisition Continuation Form

LINE ___ Type: _____

Category: _____

Item Description:

Vendor: _____

Vendor Site: _____

Vendor Item No: _____

UOM: _____ Quantity: _____ Unit Price: _____ Line \$ Total: _____

Need By Date: _____ Urgent: ___Yes ___No

Note to: ___Buyer ___Supplier ___Receiving ___Approver

Hazard Class (if known): _____

Distributions:

| General Ledger | | | | | | | | | |
|----------------|----------|---------|----------|----------|-----|----------|---------|----------|----------|
| No. | Quantity | Account | Nat Acct | Dept Use | No. | Quantity | Account | Nat Acct | Dept Use |
| 1. | | | | | 7. | | | | |
| 2. | | | | | 8. | | | | |
| 3. | | | | | 9. | | | | |
| 4. | | | | | 10. | | | | |
| 5. | | | | | 11. | | | | |
| 6. | | | | | 12. | | | | |

| Grants Management | | | | | | | |
|-------------------|----------|---------|------|-------|----------|---------|------|
| No. | Quantity | Project | Task | Award | Exp Type | Exp Org | Date |
| 1. | | | | | | | |
| 2. | | | | | | | |
| 3. | | | | | | | |
| 4. | | | | | | | |
| 5. | | | | | | | |