



**RIVER PARISHES COMMUNITY COLLEGE  
GRANT  
PURCHASE REQUISITION**

State Contract#	
PO#	

Date:	
RPCC CCI	

VENDOR	
Name	

DELIVER TO / REQUESTED BY	
Attn:	
Grant:	

1/3/2012

Item No.	Catalog Number	Description (Give Specific Details)	Quantity	Unit of Measure	Unit Price	Amount
1						\$ -
2						\$ -
3						\$ -
4						\$ -
5						\$ -
6						\$ -
7						\$ -
8						\$ -
9						\$ -
10					-	\$ -
11		Shipping			-	\$ -
<b>Note: Shipping must included total, even if, zero</b>			<b>TOTAL</b>		\$	-

<b>Comments:</b>
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Approved By: \_\_\_\_\_  
Principal Investigator

\_\_\_\_\_ Date

Approved By: \_\_\_\_\_  
Department Head

\_\_\_\_\_ Date

Approved By: \_\_\_\_\_  
Sponsored Programs

\_\_\_\_\_ Date

Approved By: \_\_\_\_\_  
Restricted Funds

\_\_\_\_\_ Date

**RESTRICTED FUNDS USE ONLY**

Item No.'s	Fund	Organization	Account	Program	Project Grant	Amount