## BOROUGH OF MIDLAND PARK Purchase Requisition

DATE:	DEPAR	RTMENT:	
ACCOUNT #:	Single Source	State/County Contract No	
Quantity	<b>Products/Services</b>	Unit Price	Total Price
Council Sign	ature will be needed if the tot amount is over \$500.00	al requisition TOTAL	
Vendor:		I hereby certify that the artic necessary to conduct activities	
Address:		Dept. Head:	
City:			
State:	ZIP:	Council:	
Phone:		СГО:	
Fax:		Certification of Avail	lability of Funds
If an expendit	ure is over \$250, please provide	additional 2 quotes below:	
Vendor 1:		Price:	
Vendor 2:		Price:	

If an expenditure is over \$1,000, three written price quotes must be attached.