

BOROUGH OF MIDLAND PARK

Purchase Requisition

DATE: _____ **DEPARTMENT:** _____

ACCOUNT #: _____ **Single Source** **State/County Contract** **No** _____

Quantity	Products/Services	Unit Price	Total Price

Council Signature will be needed if the total requisition amount is over \$500.00. **TOTAL** _____

Vendor: _____
Address: _____
City: _____
State: _____ **ZIP:** _____
Phone: _____
FAX: _____

I hereby certify that the articles requested are necessary to conduct activities of this department.

Dept. Head: _____
Council: _____
CFO: _____

Certification of Availability of Funds

If an expenditure is over \$250, please provide additional two quotes below:

Vendor 1: _____ Price: _____
 Vendor 2: _____ Price: _____

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