

Requisition # \_\_\_\_\_  
Input Date \_\_\_\_\_  
(Library Services office use only)

**Library Media Services  
Requisition Entry Form**

**Small Purchase Order (SPO) Request Form**

*Please indicate how you want to obtain the SPO  
by checking the desired option and filling in the date.*

**( ) I want the SPO to be mailed to me by \_\_\_\_\_ (Date).**

**( ) I will pick up the SPO at Library Services on \_\_\_\_\_ (Date).**

Local Vendor Name \_\_\_\_\_

Local Vendor Address \_\_\_\_\_  
\_\_\_\_\_

Items are to be purchased by (Librarian name) \_\_\_\_\_

Employee Number (Librarian's) \_\_\_\_\_ Amount not to exceed \_\_\_\_\_

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School Name \_\_\_\_\_ Location Number \_\_\_\_\_

Ordered by \_\_\_\_\_ Date \_\_\_\_\_

School (Library) Phone \_\_\_\_\_  
.....

**Reminder:**

**The itemized store receipt must be mailed or delivered to the acquisitions department within one(1) working day of the purchase.**