MISSISSIPPI STATE UNIVERSITY REQUISITION

STATE CONTRACT

PAGE of					NO:	Automatic	
SUGGESTED VENI	OOR:		SHIPTO:				
VENDO	R ID NUMBER						
				2 [for vendor del	2 -		
VENDO	R NAME		-[for department pick-up]				
VENDO	R ADDRESS						
VENDO	R CITY, STATE, ZIP						
[If vendor is not in B	anner or if address is in	correct, type correct info	ormation at end of Item 7	ext and vendor file	le will be update	ed.]	
DATE: Automatic	TERMS: Net 30	FOB:	SHIP VIA: BEST WAY or				
				OUF	R PICK UP		
BID BY:		BID FILE:	STATE CONTRACT:	ENTER STATE	E CONTRACT	NUMBER	
QUANTITY	DESCRI	PTION		UNI	T PRICE	TOTAL PRICE	
QUANT	TITY ENTER	ENTER ITEM DESCRIPTION			TER PRICE		

NOTES:

- -- If you have received a lower quote, enter the quote info in the "Bid By" section
- -- If you have any attachments, add a note in text "HOLD FOR ATTACHMENTS"

								TOTAL	xxxx.xx
FUND	ORG	ACCT	PROG	ACTV	ORDER	AMOUNT			
xxxxxx	xxxxxx	xxxxxx	xxxxxx			XXXX.XX	CONTACT NA	f: ME: [key your na	me]

DEPARTMENT:

[key department name] [key department address] [key mail stop no.]

TELEPHONE: [key your phone number]