MISSISSIPPI STATE UNIVERSITY REQUISITION

LODGING - FAX TO VENDOR

PAGE

of

SUGGESTED VENDOR:						SHIPTO:			
	VENDOR	NUMBEI	R				-		
	VENDOR VENDOR VENDOR	ADDRES							
[If vendor	r is not in Ban	ner or if a	ddress is inc	correct, typ	pe correct in	formation at end	of Item Text and v	endor file will be up	odated.]
DATE:		TERMS:	NET 30		FOB:		SHIP VIA	Λ: -	
BID BY:						STATE CONT			
			DESCRIPTION						
			Provide lodging for [person or persons] @ [dollars] per night [business purpose of overnight stay] Arrival: [date] Departure: [date] Guest responsible for incidentals [include this statement if your department does not want to be responsible for meals, movies, phone or other charges] Reference Confirmation No. [from the vendor for reservation] Not to exceed 500.00 P&C: Fax PO to xxx-xxx-xxxx attention John Doe						
Business	isition can be upurpose for these candidate, g	e overnig	ht stay is nee	eded.					
								TOTAL	
FUND	ORG	ACCT	PROG	ACTV	ORDER	AMOUNT			
XXXXXX	xxxxxx or	405510 405860	xxxxxx if Employe	e Recruit	ment Cost		CONTAC N.	CT: AME: [key your na	ıme]

DEPARTMENT:

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

TELEPHONE: [key your phone number]

NO: Automatic