



AUDITOR-CONTROLLER

RIVERSIDE COUNTY AUDITOR-CONTROLLER  
**PURCHASE REQUEST**

OFFICE USE ONLY	
PR NO.	_____
DATE:	_____
BY:	_____
PO NO.	_____

DATE: \_\_\_\_\_ REQUESTOR: \_\_\_\_\_ PHONE#: \_\_\_\_\_ DIVISION: \_\_\_\_\_

DATE WANTED: \_\_\_\_\_ SUGGESTED VENDOR: \_\_\_\_\_ PHONE #: \_\_\_\_\_

REASON FOR PURCHASE (Explain): \_\_\_\_\_

ITEM NO.	QUAN-TITY	UNITS	COMPLETE DESCRIPTION IF MORE SPACE IS NEEDED, ATTACH SEPARATE SHEET	NOT TO EXCEED	
				UNIT COST	EXTENDED
1					
2					
3					

BUDGET APPROVAL (FA)	ITEM NO.	FUND / DEPT ID / DEPT ID - ACCOUNT / PROJECT ID	SHIPPING TOTAL COST
		10000 / 1300100000 / 1300200000 - _____ / _____	_____

	1		<b>NOTES:</b>
	2		
	3		

**DIVISION HEAD APPROVAL:** \_\_\_\_\_ **DATE:** \_\_\_\_\_

ACCOUNTS PAYABLE