

EMERGENCY PURCHASE EXPLANATION

Department Name & Number:	Required Delivery Date:	Requestor:	
Ship to Address:	City:	State:	Zip Code:

Explain the emergency circumstances:

ITEM NO.	QTY	UNIT	SPECIFICATIONS

Bidder 1		
Company:		
Contact:	State:	
Telephone Number:		
E-mail Address:		
Delivery Date:		
Quote Date:		
Product Quoted	Unit Price	Total Price
Shipping/Handling Charges:		
Total Price:		

Bidder 2		
Company:		
Contact:	State:	
Telephone Number:		
E-mail Address:		
Delivery Date:		
Quote Date:		
Product Quoted	Unit Price	Total Price
Shipping/Handling Charges:		
Total Price:		

Bidder 3		
Company:		
Contact:	State:	
Telephone Number:		
E-mail Address:		
Delivery Date:		
Quote Date:		
Product Quoted	Unit Price	Total Price
Shipping/Handling Charges:		
Total Price:		