



California Institute of Technology Blanket Order Requisition

(For New Blankets Only)

Please send completed and approved form to the Purchasing Department, Mail Code 103-6

A DEPARTMENT INFORMATION

Department Name	Department Code	Date
Preparer	Mail Code	Extension
Requestor	Mail Code	Extension

B SUPPLIER INFORMATION

Supplier Name	
Supplier Street Address	
Supplier City, State and Zip Code	
Supplier Telephone No.	
Description of Services to be Provided	
Caltech Account Number (If Known)	
Current Blanket P.O. No. (If Applicable)	
Period of Performance for New Blanket	through
\$ Funding (This transaction)	\$ <input type="text"/> Estimated Yearly Expenditure: \$ <input type="text"/>

C POETAS	NOTE: If Sundry Order then "X" this box	<input type="checkbox"/>	and skip this section and go to Section D
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Project-Task-Award		Expenditure		\$	
Project-Task-Award		Expenditure		\$	
Project-Task-Award		Expenditure		\$	

D INVOICE AUTHORIZATION (Payables needs to know to whom to send invoice(s) for approval
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Name	Mail Code	Extension

E NONCOMPETITIVE RATIONALE (FOR BLANKETS EXCEEDING \$10,000.00)
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Briefly explain why this company is the only one who can perform the requirements within performance, delivery, or cost constraints. Address the following: Are there any other companies who can do this job? What conditions (e.g. time, money, technological superiority, or performance risks) exist so that the recommended company has a significant advantage over any other vendor who could do this job).

F COMMENTS (Special Instructions, etc.)
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G APPROVALS

Submitted By (Typed Name)		Approved By (Typed Name)	
Mail Code	Extension	Mail Code	Extension
Signature	Date	Signature	Date

BlanketRequisition CIT 0044 R04/03

For Purchasing Use Only: Control # _____ P. O. # _____