

PURCHASING FAX COVERSHEET / REQUISITION CHECKLIST

Please send all faxes to: **(212) 854-2699**
(Use the Tab Key to enter form fields)

Date:

To:

Sender Name:

Dept Name:

Email:

Total Pages:

Requisition Number:

(Requisition Number must
be typed – hit Tab key to
enter)

COMMENTS:

Requisition Backup Documentation Checklist: (Select Purchase Type)

For more information and/or the required forms, click on the links below or visit our [forms page](#)

Goods & Services :

Vendor Selection Form
Quote(s) or Proposal(s) from Vendor(s) as required by [policy](#):
Sole or Single Bid/Proposal, or
Competitive Bids/Proposals, or
University-wide Agreement Vendor Proposal

Equipment Lease:

Quote(s)/Proposal(s) from Vendor(s)

Consultant Services:

Vendor Selection Form
[A CU consultant agreement signed by proposed consultant](#)
A scope of work. (Proposal from Vendor)
[Consultant Worksheet and a Vendor Questionnaire Survey Form](#)
Copy of consultant's resume, or corporate brochure
Insurance Certificate

Construction/Facilities:

Quote(s)/Proposal(s) from Vendor(s)
[Bid Summary Form](#)
[Project Proposal Form](#)
Contract
Insurance Certificate
Bid Package

Subaward:

Fully executed subcontract agreement

Change Order:

Supporting Documentation