



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)	\$	Estimated Yearly Expenditure:	\$

C POETAS	NOTE: If Sundry Order then "X" this box	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)

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	Mail Code
Extension	Extension
Signature	Signature
Date	Date

BlanketRequisition CIT 0044 R04/03

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