

**CITY OF HIDALGO
PURCHASE ORDER REQUISITION**

DEPARTMENT: _____

DATE: _____

Requested by: _____

PURCHASE ORDER # : _____

Approved by: _____

City Manager _____

DESCRIPTION	VENDOR	NUMBER ITEMS	UNIT COST	TOTAL COST	GL ACCOUNT NUMBER
		-	\$ -	\$ -	
		-	\$ -	\$ -	
		-	\$ -	\$ -	
		-	\$ -	\$ -	
		-	\$ -	\$ -	
		-	\$ -	\$ -	
		-	\$ -	\$ -	
		-	\$ -	\$ -	
		-	\$ -	\$ -	
		-	TOTAL	\$ -	
TELEPHONE QUOTES					
WRITTEN QUOTES					
		-	\$ -	\$ -	
		-	\$ -	\$ -	



Budgeted? Yes No
 Bid Amount _____
 Under Budget _____

Budget Amount _____
 Amount Spent _____
 Amount Remaining _____

