

**PURCHASING REQUISITION FORM**

*W-1270 form must be attached with complete coding or request will be returned.*

**TO:** Central Office Purchasing Unit  
25 Sigourney Street - 9th Floor  
Hartford, CT 06106-5033

Date: \_\_\_\_\_

**FROM:** \_\_\_\_\_

Phone: \_\_\_\_\_

Commodity/Service to Be Purchased: \_\_\_\_\_

**WHY THIS PURCHASE IS NECESSARY TO SUSTAIN AGENCY OPERATIONS:** \_\_\_\_\_

\_\_\_\_\_  
Printed Name of RA/Director

\_\_\_\_\_  
RA/Director Signature (Required)  
Original Signature Only

\_\_\_\_\_  
Date

Approval from Commissioner's Office or Deputy Commissioner for all requests for business cards or letter head and all requests for expenditures over \$250.00.

Approved  
 Denied

\_\_\_\_\_  
Commissioner's Office or Deputy Commissioner's Signature

\_\_\_\_\_  
Date

Vendor (if known): \_\_\_\_\_

Vendor Address: \_\_\_\_\_

Vendor FEIN: \_\_\_\_\_ Estimated Cost: \_\_\_\_\_

Have you considered a small and/or Minority Business Enterprise?     Yes     No

**FOR PURCHASING USE ONLY**

\_\_\_\_\_  
PO # / P-Card

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

Returned to Requestor:

\_\_\_\_\_  
Reason

\_\_\_\_\_  
Date