

COTC Blanket Purchase Order Backup Form

Use this form for purchases in which a quote or estimate is not available from the vendor or supplier.

Date _____

Vendor _____

Describe products or services included in this blanket _____

Anticipated Annual Expense _____

Do you anticipate additional expenses with this vendor this fiscal year? Yes ____ No ____

If yes, please explain why those expenses are not included in this blanket request

