

**ALCOHOL REQUISITON FORM**

**OFMD Mail & Receiving**

**FAX ALL ORDERS TO 314‐362‐3172**

Customers: \* Complete items 1‐4 below

* FMD Support Services will bill you via Inter‐Departmental Invoice (ID) in AIS
* Bring a printed copy of the fully approved (complete status) document to pick up order

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| --- | --- | --- |
| **(1) Date of requisition:**  **Date Needed:** | | |
| **(2) Item(s) Requisitioned** |  | **Estimated Price** |
|  |  |
|  |  |
|  |  |
| **Total Requisition** |  |
| **(3) Billing Information:**  DEPT (Where ID will route) Authorized Signature Date  Contact Name Phone # | | |
| **(4)Authorization‐ *completed by OFMD Mail & Receiving Services***  ***Entered into AIS Date*** ***Document #*** ***By***  **Requisitions cannot be shipped until document is fully approved (complete status)** | | |
| **(5) Shipping Information‐ *completed by OFMD Mail & Receiving Services***  This is to certify that the items described above were received by:  Signature Date | | |

Sorry no phone orders. For emergency situations contact:

Alcohol orders ‐‐ Dock @362‐3093 Stamp orders ‐‐ Post Office @362‐1091