BEFORE ENTERING YOUR REQUISITION, provide information on the new address or correction to an existing address and fax this form to the Purchasing Department (968-0633). Purchasing will enter the new address or correct the existing one, note the assigned address number and return this form to the fax number listed below. Please indicate any address numbers that need to be deleted. If you have questions or need assistance, please call 968-0269. From: (Department Name) (Departmental Fax No) ACTION REQUESTED: Additional Address _____ Change Existing Address Address Number to be Deleted Name of Company or Sole Proprietor Dba Street Address PO Box City, State, Zip Telephone Number Fax Number Web Site E-mail Address Requested By: (Signature) Approved By: (Signature of Immediate Supervisor) FOR PURCHASING USE: Date Entered

Date:

Initials

ATU REQUEST FOR NEW/CORRECTED ADDRESS