

Purchase Order Log

Emergency Response

PO#	Date/Time		Priority 1,2,3,4	Brief Description of Goods & Services	Qty/ Unit	Delivery: Required		Vendor Name Contact, Phone#, Address & Price Quote
	In	Out				Date/Time	Location, Contact & Phone# Requesting Dept, Contact, Phone#, Index & SubObject	

- 1-Immediate Life & Death
- 2-Health & Safety
- 3-Operational Necessity
- 4-Operational Need

Expeditor's Name: \_\_\_\_\_

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