

SUBSCRIPTION RECEIVING FORM

SCHOOL/DEPARTMENT: _____

DATE, SIGN, AND RETURN THIS FORM TO THE PURCHASING DEPARTMENT
ONCE THE FIRST ISSUE OF YOUR SUBSCRIPTION HAS BEEN RECEIVED.

PURCHASE ORDER # _____

VENDOR NAME: _____

DATE FIRST ISSUE WAS RECEIVED: _____

SIGNATURE: _____

<u>ITEM</u>	<u>SUBSCRIPTION TITLE</u>
1	_____
2	_____
3	_____
4	_____
5	_____
6	_____
7	_____
8	_____
9	_____
10	_____

(NOTE: If all issues are not received at the same time, make a copy of this form and send it to the Purchasing Office as the issues are received.)