

PURCHASE REQUISITION



THAI POLYACETAL CO., LTD.



THAI POLYCARBONATE CO., LTD.

- ☐ TPAC PROJECT 1
- ☐ TPAC PROJECT 2
- ☐ TPAC PROJECT 3
- ☐ TPCC PROJECT 1
- ☐ TPCC PROJECT 2
- ☐ CG Concerning
- ☐ SCA Concerning
- ☐ ISO/IEC17025

For Purchasing Dept.

Date Received:

Purchaser:

SAP PR No. :

Issuing Date :

Recipient Name :

OBJECTIVE/DELIVER TO:

Deapartment

Department Code :

BUDGET

Estimated Cost :

For standard purchase item, Co-Signed by :

☐ AD ☐ IT ☐ SE ☐ Don't need Co-Sign

For RM, Co-Signed by: ☐ QC

ITEM	DESCRIPTION	QUANTITY	MATERIAL CODE	EST. COST WBS/COST CENTER CODE	DATE NEEDED	PRESENT PRICE INQUIRY			PURCHASING AMOUNT		TERM OF PAYMENT	PURCHASING ORDER	
						VENDOR-1	VENDOR-2	VENDOR-3	PER UNIT	AMOUNT		NO.	DATE

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Requested By:

Approved By:

Department Manager:

Sr. Dept Mgr./ Executive

Authorized By

Advisor/GM: (> 30,001 THB)

Plant Manager: (> 200,001 THB)

Vice President: (> 500,001 THB)

President: (>1 MB THB)

Authority Countersigned

Purchasing Department

Officer:

Supervisor:

Section Manager /
Department Manager:

General Manager:

<div>PURCHASE REQUISITION</div> <div><div><div><div></div><div>TPAC</div></div><div>THAI POLYACETAL CO., LTD.</div></div><div><div><div></div><div>TPCC</div></div><div>THAI POLYCARBONATE CO., LTD.</div></div></div> <div><div><input type="checkbox"/> TPAC PROJECT 1 <input type="checkbox"/> TPAC PROJECT 3 <input type="checkbox"/> TPCC PROJECT 1 <input type="checkbox"/> CG Concerning <input type="checkbox"/> ISO/IEC17025</div><div><input type="checkbox"/> TPAC PROJECT 2 <input type="checkbox"/> TPCC PROJECT 2 <input type="checkbox"/> SCA Concerning</div></div>						<div>For Purchasing Dept.</div> <div>Date Received:</div> <div>Purchaser:</div>				<div>SAP PR No. :</div> <div>Issuing Date :</div> <div>Recipient Name :</div>				
						OBJECTIVE/DELIVER TO:								
<div>Deapartment</div> <div>Department Code :</div>		<div>BUDGET</div> <div>Estimated Cost :</div>		<div>For standard purchase item, Co-Signed by : <input type="checkbox"/> AD <input type="checkbox"/> IT <input type="checkbox"/> SE <input type="checkbox"/> Don't need Co-Sign For RM, Co-Signed by: <input type="checkbox"/> QC</div>										
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						VENDOR-1	VENDOR-2	VENDOR-3	PER UNIT	AMOUNT		NO.	DATE	
			Total :											
Requested By: <div></div>			Authorized By <div>Advisor/GM:<div>> 30,001 THB</div></div> <div>Plant Manager:<div>> 200,001 THB</div></div> <div>Vice President:<div>> 500,001 THB</div></div> <div>President:<div>>1 MB THB</div></div> <div>Authority Countersigned</div>						Purchasing Department <div>Officer:<div></div></div> <div>Supervisor:<div></div></div> <div>Section Manager / Department Manager:<div></div></div> <div>General Manager:<div></div></div>					
Approved By: <div></div> <div>Department Manager:</div> <div>Sr. Dept Mgr./ Executive</div>														