

Kansas Highway Patrol
Partners Program
Order Receipt Confirmation



TO: Randy Brown
FAX: 785-368-8069

FROM: _____

DATE: PARTNERS PO#

Your Purchase Requisition has been processed, and the vendor will ship directly to you. When you have taken delivery of your order, please provide the information requested below, sign and return to the PARTNERS Program Coordinator to approve disbursement of funds for payment. As per the program Memorandum of Agreement, this form must be returned to us immediately upon receipt of your order. You may fax the completed form to 785-368-8069. We look forward to serving you again. Please contact us if you have any questions. Thank you.

ITEM NUMBER	DESCRIPTION	QTY	COST EACH	COST TOTAL	DATE RECEIVED

I certify that the above item(s) has/have been received in satisfactory and acceptable condition and hereby authorize the PARTNERS Program Coordinator to disburse funds for payment to the supplying vendor

Acceptance Date _____

Authorized Signature _____

Please Print Name _____