



**Purchasing Department**  
**33 E BROADWAY AVE. STE 106**

SHIP TO  
CITY OF MERIDIAN

## Public Works

MERIDIAN, ID 83642

TEL: (208) 489-0417

FAX: (208) 887-4813

**SUGGESTED  
VENDOR**

TBD

## Purchase Requisition

DATE OF REQUEST

4/25/2025

**PURCHASE ORDER NUMBER MUST APPEAR ON ALL INVOICES, PACKING SLIPS, CARTONS AND CORRESPONDENCE RELATED TO THIS ORDER**

**AVAILABLE BUDGET AMOUNT**

**\$2,385,000.00**

IS BUDGET AMENDMENT REQUIRED?

Z  
o

CITY SUPPORT TICKET NO.

<b>PROJECT MANAGER</b>			<b>REQUESTOR</b>
Jared Hale	PAYMENT TERMS NET 30	FREIGHT TERMS PREPAID	Jared Hale
		F.O.B. DESTINATION	

**PROJECT NAME:** Well 10b Treatment Facility

[illegible]

**NOTES:** Council Approval Date:

**\$1,795,000.00**

W. Randolph