



STAMP VENDORS POSTAGE STAMP REQUISITION

VENDOR'S NAME: _____

VENDOR'S ADDRESS: _____

Denomination	Quantity	Total Value	Commission	Commission allowed
0.15		0	10%	0
0.25		0	10%	0
0.3		0	10%	0
0.4		0	10%	0
0.5		0	10%	0
0.6		0	10%	0
0.65		0	10%	0
0.75		0	10%	0
0.8		0	10%	0
\$1.00		0	10%	0
\$1.10		0	10%	0
\$1.25		0	10%	0
\$1.35		0	10%	0
\$1.50		0	10%	0
\$1.90		0	10%	0
\$2.00		0	10%	0
\$2.25		0	10%	0
\$2.40		0	10%	0
\$2.50		0	10%	0
\$2.75		0	10%	0
\$3.00		0	10%	0
\$3.50		0	10%	0
\$3.75		0	10%	0
\$3.80		0	10%	0
\$4.00		0	10%	0
\$5.00		0	10%	0
\$10.00		0	10%	0
			Total Commission on order	0
Grand Total		0		
Less: Commission		0		
Net Amount Due		0		

Signature of Vendor: _____

Date: _____

Sales Officer: _____