## **ECCO Center**

Kate Gleason College of Engineering Purchase Requisition

This form is to be used for purchases made with the Purchasing card from the ECCO Office or to request reimbursement for project purchases.

		Multi-Dis	sciplinary	Robotics Club			
Project Name				Project Team Number			
Vendor:				CompressorsDirect			
Vendor Contact:				•			
Vendor Address:							
Vendor City/State/Zip				(000) 107 0000			
Vendor Phone Number:				(866)-437-8002			
Vendor Fax Number:							
Vendor Email:				service@aircompressorsdirect.com			
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Item	Qty	Part Number		Description	Unit Price	Extended Price	
1	1		VIAIR 9	VIAIR 90C Compressor \$83.9		\$83.95	
2							
3							
4							
5							
	•		1		Sub-total	\$83.95	
Handling: □ Standard □ UPS 2-Day □ Fed-Ex □ UPS Overnight Amount							
					Total		
Student requester name and email (print): Alex Burbano arb8590@rit.edu						Date: 10/2/21	
Student requester name and email (print): Alex Burbano arb8590@rit.edu Reviewed by team purchasing agent (print) (if applicable):						Date:	
Faculty Approval: Ferat Sahin						Date:	
Financial Approval by ECCO Office:						Date:	
Account Number: <b>01.63100.xxxxx.10.26006.00000</b>						Date.	
		ructions:	·	200000000			
OFFIC	E USE	ONLY					
Order Entered By and Date  Date Order Received						ived/ Initials	
				]	Complete	☐ Partial	
Special	Notes	(backorders, pa	artial order	received):			