| _  |    |    |        |   |
|----|----|----|--------|---|
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| Vendor Information   |  |           |                               |            |                |                     |            |       |        |  |  |
|--|--|-----------|-------------------------------|------------|----------------|---------------------|------------|-------|--------|--|--|
| Name   | Phone                                  |           |                               |            |                |                     |            |       |        |  |  |
| Address  |  | Fax       |                               |            |                |                     |            |       |        |  |  |
| City   |  |           |                               |            |                |                     |            |       |        |  |  |
|  | Email                                  |           |                               |            |                |                     |            |       |        |  |  |
| State Zip SSN/TIN  |  |           |                               |            |                |                     |            |       |        |  |  |
| This is a (check one):Check Request/Petty Cash Purchase Requisition Supply Order |  |           |                               |            |                |                     |            |       |        |  |  |
| Purpose of Check   |  |           |                               |            |                |                     |            |       |        |  |  |
| Description of   | of Item/Service                        | Inv./Iten | n #                           | Tax Exempt | Price          | Qty.                | Acct #     | Dept. | Amount |  |  |
|  |  |           |                               |            |                |                     |            |       | \$     |  |  |
|  |  |           |                               |            |                |                     |            |       | \$     |  |  |
|  |  |           |                               |            |                |                     |            |       | \$     |  |  |
|  |  |           |                               |            |                |                     |            |       | \$     |  |  |
|  |  |           |                               |            |                |                     |            |       | \$     |  |  |
|  |  |           |                               |            |                |                     |            |       | \$     |  |  |
|  |  |           |                               |            |                |                     |            |       | \$     |  |  |
|  |  |           |                               |            |                |                     |            |       | \$     |  |  |
|  |  |           |                               |            |                |                     |            |       | \$     |  |  |
|  |  |           |                               |            |                |                     |            |       | \$     |  |  |
| Comments/Special Instructions  |  |           |                               | S          | ales Tax Rate: | 0.00%               | \$         |       |        |  |  |
|  |  | Reques    | Request is to be (check one): |            |                |                     | Shipping & | \$    |        |  |  |
|  | Mailed Faxed                           |           |                               |            |                | Labor Charges:      |            | \$    |        |  |  |
|  | Held for:                              |           |                               |            |                | Deposits/Discounts: |            | \$    |        |  |  |
|  | Supply Order - remit to Finance Office |           |                               |            |                | Total:              |            | \$    |        |  |  |
| Authorization  |  |           |                               |            |                |                     |            |       |        |  |  |
| Danis da de  |  |           |                               | 7141101124 |                |                     |            |       |        |  |  |
| Requested By:  |  |           |                               |            |                |                     |            |       |        |  |  |
|  | PRINT NAME                             | SIGNATURE |                               |            |                |                     |            |       | DATE   |  |  |
| Department<br>Approval:  |  |           |                               |            |                |                     |            |       |        |  |  |
| If over \$500,   | PRINT NAME                             | SIGNATURE |                               |            |                |                     |            |       | DATE   |  |  |
| approved by:   |  |           |                               |            |                |                     |            |       |        |  |  |
|  | PRINT NAME                             |           |                               | SIG        | NATURE         |                     |            |       | DATE   |  |  |
| Finance Office Use Only  |  |           |                               |            |                |                     |            |       |        |  |  |