

POLYTECHNIC PROCUREMENT FORM

(All fields are required, please include N/A)

Please note :

-An itemized receipt is required for all credit card purchases &

Request for Reimbursement

-Alcohol cannot be purchased on the Hospitality Card!

REQUESTOR:

DEPT:

Additional Contact Person:

CC #

Contact Email Address(s):

Actual Amount:

VENDOR/PAYEE:

VENDOR NUMBER:

(Try to get items through preferred/punch-out vendors before others)

VENDOR ADDRESS:

VENDOR WEB ADDRESS:

VENDOR PHONE NUMBER:

DATE OF ACTIVITY OR WHEN NEEDED BY:

PLEASE CHECK ONE:

- PRF
- CHECK OUT
- VENDOR PAYMENT (ATTACH INVOICE)
- REQUEST FOR REIMBURSEMENT
- ORDER REQUEST
 - QUOTE ATTACHED
 - VENDOR WEBSITE
 - OTHER

DATE PRICE OBTAINED:

QUOTE VALID END DATE:

SHIP TO ADDRESS

NAME:

ACCOUNT(S) TO BE CHARGED

BLDG: ROOM:

PRF ACCOUNT

ORDER/WBSE

G/L ACCOUNT

AMOUNT

STREET ADDRESS:

ITEM DESCRIPTION

PART NUMBER

QUANTITY

UNIT PRICE

EXTENDED PRICE

Total Expenses

PURPOSE OF ACTIVITY/MATERIAL USED FOR:

PURCHASING CENTER USE ONLY:

FOOTPRINT TICKET #:

ZV60 #:

DATE RECEIVED:

RECEIVED BY:

INDIVIDUALS ATTENDING:

Alumni Students Guests Other

Requestor Signature:



Date:

Signature certifies that the requestor has the technical expertise and/or direct knowledge that these item(s) and costs will benefit the project(s) indicated.

Department Head/Dean Signature

Date:

Business Office Use Only:

Comptroller Approval

Date