



PHYSICS, ASTRONOMY AND NCMN
PURCHASE REQUISITION

FOR OFFICE USE ONLY

SUGGESTED VENDOR

NAME, COMPANY

STREET ADDRESS

CITY, STATE, ZIP

HOW IS PURCHASED USED FOR THIS RESEARCH PROJECT

PHONE # **FAX #**

CONTACT NAME/PHONE #

INTERNET ADDRESS

REQUIRED DELIVERY DATE (MONTH/DAY/YEAR)

DOCUMENT

CARDHOLDER

CONFIRM. No.

Date Ordered

Date Rec'd

Date Auth Pay

Shipping Method

GL #/Cost Element	AMOUNT

PART NUMBER	SHORT TEXT/DESCRIPTION	QUANTITY	UNIT	UNIT PRICE	TOTAL PRICE
-	Optiplex 7090 Tower	1		\$1,087.53	\$1,087.53
					\$0.00
					\$0.00
					\$0.00
					\$0.00
					\$0.00
					\$0.00
					\$0.00
					\$0.00
					\$0.00
					\$0.00
GRAND TOTAL					\$1,087.53

COST OBJECT/WBS ELEMENT

TODAY'S DATE



REQUESTOR'S NAME

PHONE #

SUPERVISOR'S NAME

Save & Submit to: papurchasing2@unl.edu

SPECIAL INSTRUCTIONS:

See attached quote for additional details.
 Sheet 1 of 1