



PURCHASE REQUEST

FOR DEPT USE ONLY

Req. Description: _____

PeopleSoft REQ # _____

DATE AND TIME: _____

Name of Requisitioner: _____

DELIVER TO (Room, Bldg., Extension): _____

SPEEDTYPE (previously acct. #): _____

Date: _____

ACCOUNT NUMBER (previously EXPENSE CLASSIFICATIONS)

531100	Stationery & Office Supplies	534100	Visitor Travel
531200	Laboratory & Research Supplies	534200	Faculty & Staff Travel
531260	Minor Expendable Equipment	534300	Registration Fees
531400	Food Service & Supplies	534310	Lecture Fees
531600	Catalogs & Publications	535300	Communications -POSTAGE
531700	Books, Periodicals, Bindings	536200	Major Equipment (= , > \$5,000)
533200	Consulting	541100	Maint., Materials & Supplies
533730	Other Purchases (Outside)	543100	Equipment Repair - Contract
533800	Sub-Contracts	543200	Movable Equipment Repair

NAME OF VENDOR: _____

ADDRESS: _____

CITY, STATE: _____

ZIP CODE: _____

TELEPHONE NO.: _____

FAX NO: _____

ATTENTION: _____

Can this be ordered online? Yes or No _____

If yes, list website: _____

Will this company accept a credit card order? Yes or No _____

SHIP TO ARRIVE: _____

Attachment? (quote or drawing) Yes or No _____

*SPECIAL INSTRUCTIONS: _____

Quantity	Catalog/item #	Description	unit price	total price
				\$0.00
				\$0.00
				\$0.00
				\$0.00
				\$0.00
				\$0.00
				\$0.00
				\$0.00
				\$0.00
				\$0.00
				\$0.00
				\$0.00
				\$0.00
				\$0.00
				\$0.00

TOTAL AMOUNT \$0.00

FACULTY APPROVAL: _____

DEPARTMENT APPROVAL: _____