



**The Polytechnic School
Purchase Request**

Vendor

Name _____
 Number _____
 Address _____
 City _____
 State _____
 Zip _____

Deliver To:

Address _____
 Building _____
 Room _____
 City _____

State _____
 Zip _____
 Phone _____

Order

Date: #####
 Invoice/Quote #: _____

Account

PI Name: _____
 Cost Center & Program/Grant # _____

Requestor

Name _____
 Phone _____
 E-mail _____

*Please indicate if any
chemicals are being ordered.
If so, add the lab registration
"G" number.*

Description	URL	#	Unit Price	Amount
				\$ -
				\$ -
				\$ -
				\$ -
				\$ -
				\$ -
				\$ -
				\$ -
				\$ -
				\$ -
				\$ -
				\$ -
Subtotal				\$ -
Sales Tax				\$ -
Shipping				\$ -
Total				\$ -

Was Sales Tax Charged? _____

**What is the business purpose? (Why is the purchase essential to the performance of the project?
 How will the item(s) be used? What project activities does it support?)**

Signature: _____ Date: _____
 PI Approval: _____ Date: _____

RA APPROVAL: Initials: _____ Object/Sub-Obj _____	Date: _____
---	-------------