



PROCUREMENT REQUEST

Date ___/___/___

Organization Number _____

Person Originating Request: _____

Department: _____

Requested Date of Delivery ___/___/___

**THIS IS NOT A PURCHASE ORDER
TO: CONTROLLER'S OFFICE**

This form may be used when requesting approval to purchase from the University Bookstore or University Printing and Publications. It may also be used when requesting payment for prepaid subscriptions, memberships, and registrations; or for regular purchases through the Purchasing Office.

Please give complete information concerning vendor name and address if known. All requests will be subject to the regulations of the State Division of Purchase and Contract.

VENDOR: _____

Add. 1 _____

Add. 2 _____

City State Zip _____

CHECK DISTRIBUTION

Mail to payee's address

Check to be picked up by _____
_____, date ___/___/___

Return check to department _____
_____ by _____

(Blocks for Purchasing use only)

Vendor Number / Banner ID	Terms	Cert.. Bid. Quote Number	F.O.B.
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Item No.	Quantity	Unit	(Purchasing Use Only)		Description	Unit Price	Total Prices
			Commodity Number	Class Group Im Desc.			
1							
2							
3							
4							
5							
6							
7							
8							
9							
10							
						Subtotal	
						Shipping/Handling (If known)	
						Tax Exempt	
						Grand Total	

APPROVAL requires (2) signatures:

Department Head _____

Date ___/___/___

Dean of College/or

Authorized Signature _____ Date ___/___/___

Fund&Account _____

Fund&Account _____

Fund&Account _____

Controller's Office: Approved Disapproved Reasons _____