Requisition Request Form

Please notify Amy if you need a copy of the purchase order

Date _____

Check One:

____ RPO (< **$2500** incl. tax but not shipping)
____ STANDARD REQ. **(>$2500**.)
____ Campus Wide Order (CWA)
____ Blanket Order

Check One:

____ Lab Supplies
____ Capital Equipment (>$5000)
____ Fabrication
____ Repairs
____ Other

Requested by:_____ Office Phone: _____

Email address: _____ Room #: _____

Account number to be charged: _____

P.I's approval (if required)_____

Vendor name: _____

address: _____

contact: _____ phone: _____

fax: _____

Special shipping or other requirements: _____

For orders over $2500, please submit vendor quote. For orders over $5000, submit competitive quote. Orders submitted without recommended paperwork will be delayed in Purchasing.

If over $5000, reason for sole source: _____

Item	Quan.	Unit *e.g.* ea., pkg.	Unit cost	Vendor's part number	Description
1.					
2.					
3.					
4.					
5.					
6.					
7.					
8.					