



Division of **UNDERGRADUATE STUDIES**

REQUEST TO PURCHASE

Requestor Information

Name _____

Department _____

Date of Request _____

Request Type _____

E-mail Address _____

Phone Number _____

Purchase Information

Vendor Name _____

Vendor Contact (if available) _____

Purpose of Purchase: _____

Event Information (if applicable)

Name of Event _____

Date of Event _____

Est. # of Attendees: _____
(15 and under email list of names)

Purpose of Event: _____

Item #	Description	Quantity	Price	Total

Please email a separate sheet for additional items.

GRAND TOTAL _____

Approvers Only

Funding Type: E&G C&G Foundation

Payment Type: PO P-Card Non-Travel

Department ID / Fund / Project _____

Additional Comments: _____

Department Head / Supervisor / PI Approval _____

Fiscal Manager Approval _____

To be completed by Purchasing Rep:

Date entered _____

Requisition # _____

PO # _____