



PURCHASING REQUISITION FORM

(Please completely and legibly fill out this form. All incomplete forms will be returned.)

Company Name

Date Requested

Contact Name

TechBuy RQ Number (Business Office)

Address

Banner FOP

City, State, and Zip Code

Account Manager Approval

Company Phone Number

Order Submitted By (Please print)

Company Fax Number

\$ _____
Total Amount of Order

Shipping Instructions:

- Overnight Shipping
- Regular Shipping
- Prepay & Add
- Shipping Included

Intended Use:

- Office/Admin Research
 - Course or Lab Number: _____
- Mandatory for all Course and Lab purchases.

*******Is this item RADIOACTIVE? Yes or No*******
All Radioactive items will be delivered to EH&S for inspection.

Catalog Number (not chemical CAS #)	Description of Item	Qty	Unit Price	Extended Price
1.				
2.				
3.				
4.				
5.				

Please completely and legibly fill out this form and return to the Business Office in Room 203 or in the Business Office mailbox in RM 105. All incomplete forms will be returned. See reverse side for additional ordering space.

Continuation form....

Catalog Number	Description of Item	Qty	Unit Price	Extended Price
6.				
7.				
8.				
9.				
10.				
11.				
12.				
13.				
14.				
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25.				