COLLEGE OF TECHNOLOGY PURCHASING REQUEST

(All fields are required, please include N/A)

Please note :

-An itemized receipt is required for all credit card purchases & Request for Reimbursement
-Alcohol cannot be purchased on the Hospitality
Card!

REQUESTOR: DEPARTMENT: PLEASE CHECK ONE:	
Additional Contact Person: PRF CC #	
Contact Email Address(s):	
	Amount:
VENDOR NAME: ATTACH QUOTE WHENEVER POSSIBLE REQUEST FOR REIMBURSEMENT	
(Try to get items through preferred/punch-out vendors before others)	
VENDOR ADDRESS: QUOTE ATTACHED	
OR WEB ADDRESS: VENDOR WEBSITE VENDOR DEPRESENTATIVE	
VENDOR PHONE NUMBER: DATE OF ACTIVITY OF WHEN NEEDED BY: VENDOR REPRESENTATIVE OTHER (PLEASE EXPLAIN)	
DATE OF ACTIVITY OR WHEN NEEDED BY:	
ENID TO ADDRESS	
SHIP TO ADDRESS ACCOUNT(S) TO BE CHARGED OUR ACCOUNT SYRIPATION OUR ACCOUNT	ON DATE AMOUNT
	ON DATE AMOUNT
BLDG: ROOM:	
STREET ADDRESS:	
ITEM DESCRIPTION PART NUMBER QUANTITY UNIT PRICE EXTENDED PRICE	Total Expenses
	Total Expenses
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\$	<u> </u>
\$	•
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Total: \$	-
PURPOSE OF ACTIVITY/MATERIAL USED FOR: Motor Vehicle Record (MVR):	
FACULTY/STAFF (I pass the self-assessment)	
☐ GRADUATE/UNDERGRADUATE/STUDENTS/VOLUNTEERS(I have passed the MVR review)	
Please note: The Approved Drivers Database with Risk Management will be checked	
STAFF MEMBERS ATTENDING:	, on ou
OTHER INDIVIDUALS ATTENDING: Alumni Students Guests Other	
Requestor Signature: Dated:	
Signature certifies that the requestor has the technical expertise and/or direct Department Head/Dean Signature Date	
knowledge that these item(s) and costs will benefit the project(s) indicated.	
Business Office Use Only: Order placed by:	
	ded to enreadable at
Comptroller Approval Date Shopping Cart #: ad	ded to spreadsheet