

Purchase Request Form

Biology & Neuroscience

PO or P-Card#

Order Date

Requestor name: _____

Date of request: _____

Extension or cell #: _____

Student (if applicable) * _____

* Adviser has reviewed and approves purchase

Deliver to MBH #: _____

Live or perishable? _____

Date needed: _____

Shipping Method: standard 2-Day Overnight

Pay extra to arrive by (date): _____

EDORDA STRING:					
Entity	Department	Object	Restriction	Designation	Activity
311	<input type="checkbox"/> 2110 (Biology) <input type="checkbox"/> 2140 (Neuroscience) <input type="checkbox"/> 2909 (SRPS) <input type="checkbox"/> 2902 (Start Up) Other: _____	<input type="checkbox"/> 54200 (Supplies) <input type="checkbox"/> 54000 (Equipment) Other: _____	<input type="checkbox"/> 10	Designation: Grant or Fund Name:	

VENDOR INFORMATION:	
VENDOR: _____	If quote, # _____
PHONE #: _____	Ordering everything on quote? _____
(If quote, please attach pdf of quote)	Same quantities? _____
Special Instructions: _____	

ITEM #	DESCRIPTION AND SIZE (e.g. 6/pack, 1L, 10 mg)	UNIT (ea, case)	QTY	UNIT PRICE	leave blank
1.					
2.					
3.					
4.					
5.					
6.					
7.					
8.					
9.					
10.					

Continued page 2 (page down for additional lines). If a large quote (>6 items), you may write "see quote" on line 1, and mark items and quantities needed directly on quote.

CONFIRMING:			
Order Date: _____	Ship Date: _____		
Customer Rep: _____	Delivery Date: _____		
Customer # _____	Order # _____		
NOTES: _____			

SUBTOTAL:	
Shipping:	
Other:	
TOTAL:	

- Invoice or P-card log
 Orders Log
 Stockroom notified
 Excel
 Order complete

PAGE 2

Requestor name: _____

Vendor _____

	ITEM #	DESCRIPTION AND SIZE (e.g. 6/pack, 1L, 10 mg)	UNIT	QTY	UNIT PRICE	leave blank
11.						
12.						
13.						
14.						
15.						
16.						
17.						
18.						
19.						
20.						
21.						
22.						
23.						
24.						
25.						

Invoice or P-card log

Orders Log

Stockroom notified

Excel

Order complete