

STARK

Purchase Request

	Part Number	Description	Unit Price	Quantity	Total
EXAMPLE:	12345	T-shirts	\$10.00	60	\$600.00
1.					
2.					
3.					
4.					
5.					
				Grand Total	

If more lines are needed, please attach an additional sheet.

Index	Account (if known)	
Purpose		
Requestor	Date	
Email	Date Needed By	
Vendor Name	Vendor Contact	
Vendor Phone	Vendor Email	

(To check any of the below check boxes, click on the box)

Payment Method: Purchase Order P-Card Check Request Interdepartmental Charge (IDC) Reimbursement (via Expense Workflow)

Select departments to be notified, print the form, and obtain necessary approvals:

Network Services (Signature)		
Media Services (Signature)		
□ Facilities (Signature)		
□ Other (Department & Department Head's Signature)		
□ Faculty & Lab Purchases, Assistant Dean (Signature)		
Department Head Approval*		
(Print)		
Department Head Approval*	Date	
(Signature)		
□ Business Office Review (<i>if purchase exceeds</i> \$1,000)		
(To check the box, click on the box)		
Dean Approval	Date	
(Required for purchases exceeding \$1,000)		