

Purchase Order Request

Name of Vendor: _____

Address of Vendor: _____

Vendor City: _____ State: _____ Zip: _____

Vendor Phone: _____ Vendor Fax: _____

Will this purchase be used primarily for Research OR Instruction? Please, elaborate on how the purchase will be used.

Item No.	Description	Qty	Unit	Unit Price	Total
				Shipping Cost	
				Requisition Total	

Faculty Member Making Request: _____

HPER Department Chair approval: _____ Account Number Utilized: _____