Purchase Order Request

Please Print Legibly
U of U Tax Exempt# 11874443-002-STC

Date: ________________
Name: ____________________________ U of Utah ID: _______________________
Email: ____________________________ Phone: ____________________________
Class/Team Name & Number: ____________________________
Chartfield: 01 - 00068 - _______ (Fund) - ________________ (Activity or project)
Authorized by: ____________________________
(Please print name)
Authorized by: ____________________________
(Faculty signature required)

All of the above information must be filled out for requests to be processed.
Missing or incomplete forms can cause a delay in processing.

Meal Request Requirements:
• Description of meal purpose: ____________________________
• Number of attendees: ________ (If less than 11 attendees; list the names of all attendees on the back)

Purchases will be made with U of U credit card unless otherwise required by the vendor.
Vendor: ____________________________
Sales Person or Contact Name: ____________________________
Vendor Website: ____________________________
Vendor Address: ____________________________
City, State, Zip Code: ____________________________
Phone: 1(____)____ - _______EXT - _______ Fax: 1(____)____ - _______
Quote # (Please attach documents): ____________________________

<table>
<thead>
<tr>
<th>Qty</th>
<th>Part #</th>
<th>Description</th>
<th>Cost - Each</th>
<th>Line Total</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

SubTotal ____________________________ Shipping ____________________________ Grand Total ____________________________

Purchase Requests Can Take Up To 48 Hours to Process