

Requestor:	Date:
Department:	Requisition ID:
Phone:	or check if ProCard purchase:
E-mail:	

Item or service requested:

Brief description of the business purpose of this purchase?

## **Estimated Total Costs**

\*Note: This form calculates tax by default. Some purchases may not be taxable or be taxable in part. This may be corrected on the Requisition or by Procurement Services (if necessary) at time of purchase

Qty	Unit	Description		Unit price	Extended Price
*D	no d (nlo o o			Subtotal:	
Requi	red (pleas	e complete below)		*Sales Tax:	
				Shipping:	
				TOTAL:	
					L

Accessible Technology: **IF ANY OF THE FOLLOWING APPLY YOU WILL ALSO NEED TO COMPLETE AN ICT REVIEW FORM** (FORMERLY E&IT CHECKLIST) Software applications and operating systems; Web-based internet/intranet information and applications; Telecommunications products; Video and multimedia products; Self-contained, closed products including, but not limited to printers, kiosks, FAX, Desktop and portable computers.

## Approval limits below are based on the Subtotal amount (i.e. exclusive of tax or freight)

• College Dean/AVP (greater than \$10,000):							
Printed Name	Signature	Date					
• Division Vice President or Provost (greater than \$10,000):							
Printed Name	Signature	Date					