

PURDUE LIBERAL ARTS PURCHASING FORM

PLEASE PAY (Invoice and/or Sub W-9 **MUST** Be Attached)
PURCHASE, from Vendor: _____

(If purchase is from a website, you must include direct clickable link to the item(s) requested.)

RECONCILE, Last 4 Digits of PCard: _____

REIMBURSE, Employee Name: _____

PERNR: _____

***FOR ALL HOSPITALITY PURCHASES, PLEASE USE THE
HOSPITALITY PCARD RECONCILIATION FORM!
ITEMIZED RECEIPTS ARE REQUIRED FOR ALL PCARD
PURCHASES AND REIMBURSEMENTS.***

CLA PURCHASING CENTER USE ONLY

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REQUESTOR INFORMATION:	SHIPPING INFORMATION:	PURCHASE USED FOR (PLEASE BE SPECIFIC):
NAME: _____	ATTN: _____	
DEPT: _____	BLDG: _____	
PHONE#: _____	ROOM#: _____	
E-MAIL: _____	RUSH: YES NO	
DATE: _____	NEED BY DATE: _____	

<p>I certify that this purchase conforms to the mission of Purdue University and will benefit the project indicated.</p> <p>X _____ REQUESTOR SIGNATURE</p>	<p>X _____ Engagement Service Learning Grants, Prof/Sponsor Signature (if required):</p> <p>X _____ Department Head Signature (if required)</p> <p>X _____ COMPTROLLER SIGNATURE (REQUIRED)</p>
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G/L NUMBER	INTERNAL ORDER	WBS ELEMENT	AMOUNT OR %	
				<p>*****NOTE*****</p> <p>COMPLETE ACCOUNT INFORMATION IS REQUIRED! THIS INCLUDES A G/L NUMBER! THIS INFORMATION MUST BE INCLUDED IN ORDER TO PAY, PURCHASE, RECONCILE OR REIMBURSE AND CANNOT BE COMPLETED WITH IT.</p>

PLEASE SPECIFY IF THERE ARE ANY SPECIAL ORDERING INSTRUCTIONS, DISCOUNT OR PROMO CODES, ETC:

QTY.	ITEM NUMBER	DESCRIPTION	UNIT PRICE	EXT. PRICE
SUB-TOTAL:				
SHIPPING:				
TOTAL:				