

PURCHASE REQUEST FORM
DEPARTMENT OF MECHANICAL ENGINEERING

Vendor Name: _____ Vendor Phone: _____
 Vendor Address: _____ Vendor Fax: _____

 Name of Quoter: _____
 Email of Quoter: _____

QUANTITY	DESCRIPTION: <i>(model, part, or catalog #)</i>	UNIT	UNIT PRICE	TOTAL COST
			TOTAL	

Requested By: _____ **Date:** _____
(student or professor)

Requestors Contact info: _____ **Deliver to Room:** _____
(phone and email)

PURPOSE: _____
(Reason material needed)

BENEFIT: _____
(how material benefits account charged to)

Paid off of Account #: _____ **Subcode:** _____
(students: obtain this info from your advisor) **UH Tag #:** _____
For Fabricated Equipment

APPROVED BY: _____
(Students: this is the Professor authorizing this purchase)

NOTE: YOU NEED TO ATTACH A SOLE SOURCE JUSTIFICATION, IF ORDER TOTAL IS **OVER \$9,999.99 FOR FED. FUNDS**, OR **OVER \$14,999.99 FOR NON-FED. FUNDS**, & WHERE COMPETITIVE BIDS CAN NOT BE TAKEN OR OBTAINED.