Department of Ecology and Evolutionary Biology

Purchase Order Requisition Form

DOC #_____	PO # _____	DATE RECEIVED:_____
REQ # _____	DOC # _____	LOGGED: _____

PLEASE COMPLETE THE INFORMATION BELOW:

VENDOR NAME: _____ VENDOR PHONE: _____
VENDOR WEBSITE: _____ VENDOR ADDRESS: _____
DATE SUBMITTED: _____ DATE NEEDED: _____
SHIPPING METHOD: STANDARD ◯ OVERNIGHT ◯ **YOU MAY INCUR EXTRA SHIPPING FEES WITH THIS OPTION**

SHIP TO: ECOLOGY & EVOLUTIONARY BIOLOGY
321 Steinhaus Hall,
Irvine, CA 92697-2525

SPECIAL DELIVERY INSTRUCTIONS: _____
_____
PURPOSE:_____
CIRCLE ONE: Research Instructional Repair Other

REQUESTED BY: _____ PI/ LAB NAME: _____ PHONE: _____
KFS ACCOUNT #: _____ OBJECT CODE: _____ PROJECT CODE: _____

Line	Quantity	Unit of measure	Description of Item(s)	Catalog #	Unit Price	Extended Price

APPROVAL BY PI OR AUTHORIZED DESIGNEE:

_____
Fiscal Officer Assigned_____

Subtotal	
Tax	
Shipping/Handling	
Total Cost	

METHOD: PO ◯ PAL CARD ◯ DATE ORDER PLACED: _____

CONFIRMATION #: _____ DELIVERY DATE: _____