OREGON STATE UNIVERSITY
PURCHASE REQUISITION

		BANNER PO #:	
REQUISITION DATE:		**DATE REQUIRED:**	
PROPOSED VENDOR INFORMATION:		**DEPARTMENT INFORMATION:**	
COMPANY:		**DEPARTMENT:**	
ADDRESS:		**CONTACT NAME:**	
CITY, STATE ZIP:		**TELEPHONE:**	
CONTACT NAME:		**FIS APPROVER:**	
TELEPHONE:		**TELEPHONE:**	
VENDOR CODE:	**BUYER CODE:**	**ORG CODE:**	**SHIP TO CODE:**

ITEM NO.	CATALOG OR MODEL NO. & DETAILED DESCRIPTION	QTY	UNIT	UNIT PRICE	TOTAL
This purchase includes or will include federal funding when it becomes available. Yes ☐ No ☐				TOTAL	

INDEX / FUND (Required)	ACCOUNT CODE (Required)	ACTIVITY (Optional)	AMOUNT (Required)

SPECIAL INSTRUCTIONS:	**DEPARTMENT APPROVAL** (Required if BC does not check option in BC approval)**:**
	NAME/TITLE:
	SIGNATURE:
	BUSINESS CENTER APPROVAL: Required for purchases subject to BOLI PWR at any dollar level and for other purchases of goods and services at or above $25,000
	☐ Business Center has documentation of department approval on file **OR**
	☐ Business Center has delegated budget authority to approve this purchase
	NAME/TITLE:
	SIGNATURE:
	DEAN OR VICE PROVOST APPROVAL: Required for purchases above $150,000
	NAME/TITLE:
	SIGNATURE: