

Department of Health Education & Behavior
Requisition to Purchase / Purchase Order Request

This form is used if you do not have a UF P-card (Business Credit Card) and / or 1 of the following conditions apply:

- BOOK THAT IS \$251 OR GREATER OR
- 1 ITEM IS OVER \$5,000 AND A LIFE EXPECTANCY GREATER THAN 1 YEAR OR
- ADDED VALUE TO AN EXISTING PIECE OF EQUIPMENT.

THE INFORMATION BELOW AND ATTACHED DOCUMENTATION THAT YOU PROVIDE WILL BE USED TO INITIATE A PURCHASE ORDER (PO).

Requestor's Name: _____

Vendor Information (Please complete this to the best of your ability. It will assist us in case we have a question. Please note that in some cases UF has the same vendor name in their purchasing database with multiple locations but not all locations will supply the item you are requesting, therefore an address or city & state would be helpful.)

Vendor: _____

Contact Person: _____ Phone #: _____

Address: _____

* Purchases with any agreements containing terms & conditions, including agreements that require signature, must be forwarded to Purchasing with a requisition for a Purchase Order for review / signature.

* Purchases below \$5,000, quotes encouraged but not required

* \$5,000 - \$24,999 documented quotes from two or more vendors by telephone, fax, email, or justification why not obtained is required.*

* IT purchases of \$20,000 and above AND Communication purchases of \$20K & above, must be approved by the University Information Resource Manager.

* Purchases \$25,000 - \$74,999 requires written quotes from 2 or more vendors

* \$75,000 and above, formal competitive bid required or sole source documentation completed

Please be sure that quotes include shipping costs.

Item #	Description	Qty.	Cost per Item	Total Cost
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SUBTOTAL:

Shipping:

Total Amount:

Account to Charge: _____

For purchases charged to grants, overhead, or other research account, please provide the specific purpose and benefit to the funding source:

Budget Authority Signature: _____