

**COLLEGE OF SCIENCE & ENGINEERING**

**Goods/Services Requisition Worksheet**

State Non-Auto (ST)

State Auto (SA)

Framework (FO)

Local Purchase (NB)

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Date:** | | |  | **Fund** (10 digits) : | | | | |
| **Vendor Name:**  **Vendor Number:** | | |  | **Cost Center #** (10 digits):  **or Internal Order #** | | | | |
| **Street Address:** | | |  | **Desired Delivery Date**: | | | | |
| **City:** | | |  | **Requestor Name: Phone & E-mail:** |  |  | | **Location:**  . |
| **State/Zip:** | | |
| **Phone# :** | | |  | *By signing below, Account Manager confirms purchase is for official university business and acknowledges fiscal responsibility, per UPPS 03.01.09. & applicable funding source rules.*  **Account Manager Signature**: | | | | |
| **E-mail Address (to submit orders):** | | | | | | | | |
| **Short Text**  (Brief description of item being ordered) | | | **Catalog**  **or Item #** | | **Quantity**  (# of items ordered) | **Unit**  (ea., lbs.,  ozs., etc.) | **Valuation**  ($) per Unit | **Total** |
|  | | |  | |  |  |  | $ 0.00 |
|  | | |  | |  |  |  | $ 0.00 |
|  | | |  | |  |  |  | $ 0.00 |
|  | | |  | |  |  |  | $ 0.00 |
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|  | | |  | |  |  |  | $ 0.00 |
|  | | |  | |  |  |  | $ 0.00 |
|  | | |  | |  |  |  | $ 0.00 |
| **Date entered:** | **Entered**  **by:** | **SAP Reqstn. #** | | |  | **TOTAL ORDER** | | $ 0.00 |

**ROUTING:** Send completed Worksheet form to College of Science Purchasing Office, E-mail: [**science-purchaser@txstate.edu**,](mailto:science-purchaser@txstate.edu) or a signed copy sent to CENT 203. Keep 1 copy for departmental files. Allow minimum of two (2) business days for data entry to be completed. Please, inquire first via SAP on-line using ME5A to determine whether entry has been completed, searching by the requestor's user id. After inquiring on-line, if you still have questions, contact Science Purchasing Office at 245-2262 or 245-4600.