

**COLLEGE OF SCIENCE & ENGINEERING**

**Goods/Services Requisition Worksheet**

Local Purchase (NB)

Framework (FO)

State Auto (SA)

State Non-Auto (ST)

|  |  |  |
| --- | --- | --- |
| **Date:** |  | **Fund** (10 digits) : |
|  |  |  |
| **Vendor Name:****Vendor Number:** |  | **Cost Center #** (10 digits):**or Internal Order #** |
|  |  |  |
| **Street Address:** |  | **Desired Delivery Date**: |
|  |  |  |
| **City:****State/Zip:** |  | **Requestor Name: Location:****Phone & E-mail:** . |
|  |  |  |
| **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 |
|  |  |  |  |  | $ 0.00 |
|  |  |  |  |  | $ 0.00 |
|  |  |  |  |  | $ 0.00 |
|  |  |  |  |  | $ 0.00 |
|  |  |  |  |  | $ 0.00 |
|  |  |  |  |  | $ 0.00 |
|  |  |  |  |  | $ 0.00 |
|  |  |  |  |  | $ 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**, 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.