

Department of Chemistry and Biochemistry

Departmental Order Form

All fields must be completed prior to submitting for order. Grey areas are for stockroom use only.

Purchases over \$200 will require email approval from the supervisor/account PI unless the PI makes arrangements directly with the Stockroom.

Supervisor/Account PI:

Date:

Account #:

Contact:

Telephone:

Email:

(First and Last Name)

For Stockroom Use Only

Description/Vendor	Qty	Units	Part # /MFG#	Other Comments

Submit additional forms as needed.

Order Notes:

Type of Purchase: *must be completed* **Routine** **Priority** **Urgent**

Shipping Choices-please check the appropriate box (note: Standard and Priority Overnight are for URGENT only)

Standard Rate **Cheapest Rate** **Express Saver** **Standard Overnight** **Priority Overnight**

REQUIRED DELIVERY DATE: _____ **ESTIMATE REQUIRED:** YES NO

Account Approver Signature: _____

(If Required by your Supervisor/Account PI)

For Stockroom Use Only

Account Code _____ Confirmed: ☐ Yes ☐ No Notification of Estimate: _____

Date Received: _____ Time Order Received: _____

Notifications: _____ Notified Contact: I/P _____ P/U _____

Received By: _____ Time/Date Picked up: _____