UC Irvine Charlie Dunlop School of Biological Sciences

Date: _____

PURCHASE REQUEST FORM

Charlie Dunlop School of Biological Sciences, University of California, Irvine

RETURN COMPLETED FORM TO: biosci-purchasing@uci.edu

Purchases over $5,000 require PI Approval signature

NAME:
PI/LAB NAME:
SHIPPING ADDRESS:
KFS ACCOUNT NUMBER/PROJECT CODE:
AMOUNT: $
VENDOR NAME:

*If you have an order form or quote from the vendor, please attach the documentation

Payment For:

- ☐ MEMBERSHIPS
- ☐ PUBLICATIONS
- ☐ REGISTRATION FEES (non-travel related)
- ☐ SOFTWARE
- ☐ SUPPLIES/MATERIALS
- ☐ OTHER - EXPLAIN:

Detailed description and purpose of purchase/payment:

AUTHORIZED SIGNATURE TO CHARGE ACCOUNT

Signature: _____