Required fields!

The Research Foundation of State University of New York
Binghamton University

EMAIL THIS DOCUMENT

Sponsored Funds Administration - Bio Technology Bldg.
85 Murray Hill Road
PHONE # (607) 777-6752 FAX # (607) 777-4354

◉ **Purchase Requisition for supplies**

OR

○ **Payment to supplier or reimbursement**

Date 29-May-2012

We have direct Deposit option

Supplier name and address (make check payable to)

Confirming PO Number

Project	Task	Award	Expenditure Type

SHIP TO:
Name
Dept./Org.
Building
Phone #

Phone # Fax #
Soc. Sec. # or EIN #
(Required for Technical or Consulting Services)

NOTE: IF THIS IS AN EQUIPMENT ORDER, PLEASE SEE BELOW

SUPPLIER CATALOG / ITEM NUMBER	COMPLETE DESCRIPTION	QUANTITY	UNIT	PRICE	AMOUNT
	Must use travel voucher if travel reimbursement				
			ea		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

EQUIPMENT CERTIFICATION SCREENING: There is no equipment within the department suitable and / or available for the purposes for which the equipment on this requisition is being purchased.

SUBTOTAL	$ 0.00
SHIPPING / HANDLING	$
TOTAL	$ 0.00

PLEASE CHECK ALL APPLICABLE

☐ GOODS RECEIVED, PAY SUPPLIER ☐ HAZARDOUS MATERIAL

☐ MAIL P.O. ☐ FAX P.O. ☐ EMAIL P.O ☐ CONFIRMING ☐ PRE-PAY ☐ MSDS REQUIRED

I CERTIFY THESE GOODS & SERVICES ARE NECESSARY AND EXCLUSIVE FOR THIS PROJECT, DO NOT DUPLICATE ANY EXISTING GOODS OR SERVICES, ARE TO BE USED FOR SCIENTIFIC/ PROGRAMMATIC PURPOSES FOR THIS PROJECT(S) ONLY AND WILL NOT BE USED FOR PERSONAL BENEFIT.

* Approved Signature

* AUTHORIZED SIGNATURE DELEGATION MUST BE ON FILE WITH THE SPONSORED FUNDS OFFICE

Project Director Signature

SPONSORED FUNDS USE ONLY / FISCAL APPROVAL

Revised On: 05/29/2012