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|  | | PURCHASING REQUISITION  FORM PR-101  FOR SUPPLIES, SERVICES, EQUIPMENT AND MISCELLANY | |  | | | | |
| Use of this form is required for all requests for purchase except those purchases initiated through Lander’s VISA Purchasing Card Program. Purchases contracted in excess of $500.00 without prior requisition approval (except reimbursements) will not be honored by Procurement Services and will require ratification by the President of Lander University before purchase order/payment is processed. Only the President, the Vice President for Finance & Administration, and the Director of Procurement Services has the authority to sign agreements binding Lander University. Any others signing such agreements may be personally liable for payment. | | | | | | | | |
| **SECTION 1.** | | | | | | | | |
| **TO:**  VENDOR/SUGGESTED SOURCE (Name and contact info)  L#: | | | **REQUESTED BY:**  DEPARTMENT/REQUESTOR DATE:    PHONE:      EMAIL: | | | | | |
| EXISTING VENDOR  NEW VENDOR  (If new, a Vendor Set-up form and completed W-9 are required)  EMPLOYEE/STUDENT (reimbursements only! – all other payments to employees or students must be processed through Human Resources) | | | **REQUESTING THE FOLLOWING:**  ISSUE A PURCHASE ORDER/SOLICITATION  AUTHORIZATION TO PAY  REIMBURSEMENT (must include receipts and be sent to the Business Office)  REVIEW ATTACHED CONTRACT/AGREEMENT  GOOD(S),  SERVICE(S,)  STATE CONTRACT #\_\_\_\_\_\_\_\_\_\_\_\_\_ OTHER | | | | | |
| **ATTACHMENT(S):**QUOTE(S) / INVOICE(S), SCOPE OF WORK (solicitations), TECHNOLOGY (attach Technology approval form),  VENDOR CERTIFICATE OF INSURANCE (if providing a service on campus), FOOD SERVICE (attach attendee list and Food Service approval form if not campus food services provider), OTHER | | | | | | | | |
| **SECTION 2. DESCRIPTION OF GOODS/SERVICES** | | | | | | | | |
| LINE# | DESCRIPTION | | | QTY | PRICE | | | EXT COST |
|  |  | | |  |  | | | $0.00 |
|  |  | | |  |  | | | $0.00 |
|  |  | | |  |  | | | $0.00 |
|  |  | | |  |  | | | $0.00 |
|  |  | | |  |  | | | $0.00 |
| Attach additional pages as necessary – Signatures required on the last page only | | | | | Subtotal | | | $0.00 |
| DELIVERY INSTRUCTIONS/SHIP TO: CENTRAL RECEIVING, OTHER: | | | | | Sales Tax | | |  |
| Total | | | $0.00 |
| RELATED BUSINESS PURPOSE: | | | | | | | | |
| **SECTION 3. AUTHORIZED SIGNATURES:** | | | | | **ACCOUNTING** | | | |
| By signing this I certify that there are adequate funds in this index(s) to cover this expense.  Name (Print)  Signature: Date: | | | | LINE# | INDEX | | | ACCOUNT |
|  |  | | |  |
|  |  | | |  |
| By signing this I certify that there are adequate funds in this index(s) to cover this expense.  Name (Print)  Signature: Date: | | | |  |  | | |  |
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| **SECTION 4. TO BE COMPLETED BY THE OFFICE OF PROCUREMENT** | | | | | | | | |
| METHOD OF PROCURMENT | | | | Signature/Funds verified: \_\_\_\_\_\_\_  Vendor is not debarred: \_\_\_\_\_\_\_\_ | | | | |
| PURCHASE ORDER | |  | | |
| DATE: | | | | |
| RETURNED ON \_\_\_\_-\_\_\_\_-\_\_\_\_\_\_ FOR:  SIGNATURE(S),  INDEX/ACCOUNT CORRECTION,  PCARD PAYMENT,  OTHER: | | | | | | | | |
| Questions should be directed to the Office of Procurement Services at [procurement@lander.edu](mailto:procurement@lander.edu) or 864-388-8276 | | | | | | | Page    of | |