

Seton Hall University Purchase Order Form

VENDOR ADDRESS: <input style="width: 95%; height: 20px;" type="text"/> <input style="width: 95%; height: 20px;" type="text"/> <input style="width: 95%; height: 20px;" type="text"/> <input style="width: 95%; height: 20px;" type="text"/>	BUSINESS PURPOSE FOR EXPENDITURE: <input style="width: 95%; height: 20px;" type="text"/> CHANGE ORDER PURCHASE REQUEST: ORIGINAL PO NO.: <input style="width: 80%; height: 20px;" type="text"/> INCREASE PO AMOUNT BY: <input style="width: 80%; height: 20px;" type="text"/>	SHIP-TO INFORMATION: NAME: BLDG/RM #: PHONE #: FAX #: EMAIL: ADDRESS: CITY/STATE: ZIP CODE:
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OTHER INSTRUCTIONS:

FILL IN INDEX, ACCOUNT AND OTHER PURCHASING INFORMATION. IF NO INDEX IS AVAILABLE, COMPLETE FUND, ORGANIZATION, PROGRAM AND ACCOUNT.

ACTIVITY AND LOCATION ARE OPTIONAL.

INDEX	ACCT	FUND	ORG	PROG	ACTIV	LOCN	DESCRIPTION	Unit of Measure	Quantity	UNIT COST	EXTENDED COST
											0.00
											0.00
											0.00
											0.00
											0.00
											0.00
											0.00
											0.00
											0.00
											0.00
Grand Total:										0.00	

APPROVALS: Signatures: _____ Date: _____ Requestor _____ Cost Center Mgr (up to \$1,000) _____ Budget Center Mgr (up to \$10,000) _____ Division Head (over \$10,000) _____	INSTRUCTIONS: 1. This form is to be used to request Standing Purchase Orders only. Regular Order POs should be set up in Banner Self-Service. 2. This form must have supporting documentation. 3. The user should retain a copy.
Procurement Use Only PO number: _____ Vendor number: _____ Procurement initials: _____ Date: _____	