

Purchasing Request or Reimbursement Form

Ag Business Center (ABC)

(When typing below, use the tab key to move between fields)

Name: _____ **Date:** _____ **Dept #** _____

PI / Project (items purchased for): _____

Vendor: _____

_____ **Reimbursement** (Purchase made with personal funds)

_____ **Purchase Request**

_____ **Direct Charge** (i.e. Bookstore, Software Cellar, Chem. Stockroom, Motor Pool)

_____ **IMO** (i.e. Motor Pool)

Account number(s) to be charged:

Amount to be charged:

Explanation: What was purchased & benefit or use of item(s)?

****If purchase is an Official Function expense, please complete and attach the Official Function Form in addition to the Purchasing form****

FOR ACCOUNTING USE ONLY:

Document #: _____ Date Created: _____ Account Manager _____