

# DAEMEN

A World of Opportunity

## PURCHASE REQUISITION

DATE SUBMITTED:

Check \_\_\_\_\_  
 VT \_\_\_\_\_  
 ACH \_\_\_\_\_

<b>VENDOR NAME:</b>		<b>Business Office (Voucher Month)</b>	
<b>ADDRESS:</b>		PO #:	
		VENDOR #:	
<b>CITY, STATE ZIP:</b>		W9:	

MWBE		BIDS:		TO PAYROLL:	
		CONSTR/F. A:		ADVANCE:	

BUDGET ACCOUNT # (X-XXXXXX-XXXXX)	DESCRIPTION & BUSINESS PURPOSE	QTY	COST PER ITEM	COST (QTY x COST PER ITEM)
	SHIPPING			
	TOTAL			

**SIGNATURES (1. and 2. must be signed)**

1. \_\_\_\_\_  
Requestor

3. \_\_\_\_\_  
Athletics Compliance Officer

5. \_\_\_\_\_  
Controller (Over \$1,000)

2. \_\_\_\_\_  
Department Chair/Manager or next  
level Manager

4. \_\_\_\_\_  
Grants Administration Manager  
(If Grant)

6. \_\_\_\_\_  
VP for Business Affairs  
(Over \$10,000)

Revised 4/9/21 (Business Affairs)

7. \_\_\_\_\_  
President (Over \$25,000)

=====OFFICE USE ONLY=====

VOUCHER NO.

DATE PAID

CHECK NO.

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_