

**Purchase OR
Reimbursement
Request - Non-Travel**



College of Social and Behavioral Sciences

Purchase **OR** Reimbursement Request (if reimbursement, fill in only * items, include receipts)

*Requester _____ *Employee ID _____

*Date purchase needed/made _____

*Vendor _____ **OR** No preferred vendor

Include quote and/or screen shots of items if available. *Cost/Estimated Cost _____

Provide reason for selecting preferred vendor:

If requesting computer parts or replacement, provide Property Control number and location above.

If no screen shots attached, fill in items requested below:

Quantity	Description	Estimated Price

*Public purpose of purchase (Example: Supplies for Class #, or Interviewee meal):

Request email approval and funding source from supervisor.

Speedchart _____ Account _____

Please submit this form with screen shots, receipts, and approval to: SBSPurchasing@nau.edu

Please do not write in section below.

RQ 10000 _____ PO 20000 _____ RC 3000 _____ Voucher 00 _____

Pcard payment date and cardholder user ID _____

Expense Report ID _____ Exception request info, if needed _____

Foundation Account Information _____