Purchase Request

		Today's Date:	
form last updated: August 6, 2024	Requested by:		
form last updated. August 0, 2024	C	heck box if this request includes travel.	
	C	heck box if requesting blanket approval to make recurring archases such as day travel, postage, teaching kitchen supplies, etc	
Funding Source:	If funding source WBS or cost obje	e selected is Grant or Other please provide the	
Item Detail: List items all items/soneeded, estimated cost, the date you net to this request form. If this request incleonference.	ervices/travel that you are seeking approval to purchase/book, inclued the item(s), and the assigned SIO (if applicable). If you have a quedes travel make sure to include all anticipated expenses to be in	ding a brief description of the item(s), quantity ote for the item(s), please attach it as additional pages curred as well as the dates, location, and name of the	
Business Purpose: A clear busi expenditure supports or advances the gr	ness purpose is required so that an approver, reviewer and/or audit oals, objectives, and mission of the University.	or may reasonably conclude and agree that the	
	d to processing all purchase requests as quickly and accurately as po t. Please contact Whitney Rogers at 859-257-7750 or whitney.g.rogo ies.		
BUSINESS OFFICE NOTES:	Blanket request for recurring purchases in FY25 total annual purchase amount not to exceed Individual purchexcess of \$500 will require separate approved purchase request Procurement Card SRM Declining Balance Procurement Card PRD Concur Travel Request Required		
	Pro Travel Leave Request Required Internal bill/xfer/JV Disbursement Request Payroll	Tammy Stephenson, Ph.D., FAND Department Chair, Dietetics & Human Nutrition	
Request cannot be appr	oved at this time. Please see Business Office Notes for exp	laination.	
FOR BUSINESS OFFICE USE ONLY	Approved Purchase Request # 2025		
PRD # 3000	SRM # 9000	Total Purchase Amount:	
Concur Expense Key	PO # 7500		
Concur Report Name:	Goods Receipt Date(s)		
Travel Doguest#	Invoice Poeting Date(e)		

Payment Date(s) _

Travel Request Report Key ___

Document Number(s) ____