



UNIVERSITY OF MASSACHUSETTS BOSTON

DEPARTMENTAL PURCHASE REQUEST/CHANGE
AUTHORIZATION FORM

Request Type:
 Purchase Request:
 Bid Request:
 Change Request:

Request Date:	Vendor Name/Address:	Vendor ID:	Operator:	Attachment(s): <input type="checkbox"/>	Purchase Request/Requisition No:
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Contract Type/ Number	None <input type="checkbox"/>	Sole Source <input type="checkbox"/>	MHEC #	State #	Campus #	University #
Contact Name:		Contact Dept. ID:		Contact Telephone:		Fax No:
Fax No:	Dept. Workflow Approval Date:		Date Confirmed:	Price(s) Quoted By:	Quote Date:	Other: _____
Comments:						Send Comments to Vendor: <input type="checkbox"/>

Select Type of Requisition: Description Only Requisition -or- UMASS Marketplace Requisition

For Description Only Requisitions:	Will PO be Confirmed? Yes <input type="checkbox"/> No <input type="checkbox"/>	BLANKET ORDER <input type="checkbox"/> <i>Quantity must be (1) one.</i>
	Confirmation Method: Fax <input type="checkbox"/> Phone <input type="checkbox"/>	

Chart Sring No.	Line No.	Location code: Bldg, Rm, Fl	Description	UOM	Quantity	Category	Contract	Contract Discount /Markup	Unit Price	Total Price



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DEPARTMENTAL PURCHASE REQUEST/CHANGE
AUTHORIZATION FORM - 2

Request Type:
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Request Date:	Vendor Name
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Purchase Request/Requisition No:

Chartfield String #1	Speed Chart:								
Account:	Fund:	Dept. ID:	Program:	Budget Period	PC Bus Unit:	Project / Grant:	Activity:	Total Dollar Amount:	Authorized Signature:

Chartfield String #2	Speed Chart:								
Account:	Fund:	Dept. ID:	Program:	Budget Period	PC Bus Unit:	Project / Grant:	Activity:	Total Dollar Amount:	Authorized Signature:

Chartfield String #3	Speed Chart:								
Account:	Fund:	Dept. ID:	Program:	Budget Period	PC Bus Unit:	Project / Grant:	Activity:	Total Dollar Amount:	Authorized Signature:

Chartfield String #4	Speed Chart:								
Account:	Fund:	Dept. ID:	Program:	Budget Period	PC Bus Unit:	Project / Grant:	Activity:	Total Dollar Amount:	Authorized Signature: