EXPENSE/PURCHASE REQUEST SUBMISSION FORM



Voucher #:

(for AP	use	only)
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Department #:				App	rovals (if a	pplicable)	
L/E/R Doc #: [L			IT/iSITE Tic *Required	cket #:	software purchases	
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г	R			Marketing A	pproval Da		
L			_	Approval Er	nail Include	ed: Yes	
User Reference #:							
Vendor Name:							
Amount:	\$						
Object Code(s):							
Description of Atta	chments Sent:						
Additional Comme	nts:						
Shipping/Freight Inf Please include fir		stination, we	ght, and an	y special in	structions	s for delivery.	
Liftgate Required for Del		No					
If shipment is expected to be too large		t from receiving, please inc	lude item weight, final b	uilding destination, and	any special instructi	ions for delivery.	
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