

APPLE COMPUTER P-CARD REQUEST FORM

FOR ALL APPLE PRODUCTS

Southern Illinois University
Carbondale, Illinois

(For IT - Business Use Only)

Transaction #:

(Please refer to this number on all correspondence related to this transaction.)

Instructions:

All fields are required. Signed, completed form (with saved Web Proposal and letter of justification) must be forwarded to the IT Department for approval, via fax 453-3000 or email. Upon approval, a copy will be returned to the Department. The Department then has the approval to place the order.

- * Transaction Number needs to be entered in the "Equip Purchasing Num" field, when reconciling this transaction within the P-Card System.
- * If total dollar amount of this order exceeds the P-Cardholder's Transaction Limit, contact IT Business Services to place this order for you.

IMPORTANT: All boxes **MUST** be opened within 10 days of receipt.

Note: If you are planning on the transfer of existing computers to Surplus Property or to another department, you must comply with the Data Security on State Computers Act. For more information, refer to:

Charge Account Information

Budget Purpose	Dept. Act. 1 (if applicable)	Dept. Act. 2 (if applicable)	Object Code	Over-Riding Object Code (if applicable)	Fiscal Officer (or Delegate) Signature (Signature authorizes P-Card Transaction and temporary P-Card Transaction Limit increase if necessary)	Date
<input type="text"/>	<input type="text"/>	<input type="text"/>	4420	<input type="text"/>		<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	4420	<input type="text"/>		<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	4420	<input type="text"/>		<input type="text"/>

If total dollar amount of this order is \$50,000 or more, Vice Chancellor and Chancellor approval/signature is required.

Vice Chancellor Signature

Date

Chancellor Signature

Date

Date:

Total Price:

Web Proposal #:

Brief Description:

Department:

Requestor:

Phone No.:

E-mail:

Fax No.:

P-Cardholder:

Phone No.:

E-mail:

Fax No.:

Contact Person:
(for questions or further info.)

Phone No.:

E-mail:

Departmental Shipping (Bldg#/Room#)

End User Location: (Bldg#/Room#)

Unit#: