

NC STATE

Textile Engineering, Chemistry & Science Purchase Order Form

Vendor _____	Date _____
Address _____	Name _____
_____	Email _____
Phone _____	Room # _____
Website _____	Order # _____
PI _____	Req # _____

Ship To: NC State University College of Textiles, TECS Dept 1020 Main Campus Drive Raleigh, NC 27606	Send Bills To: NC State University College of Textiles, TECS Dept 1020 Main Campus Drive Raleigh, NC 27606 Attn: Joyce Cole 919-515-6635 jmcole3@ncsu.edu	CC Billing Address: NC State University 2721 Sullivan Drive Campus Box 7212 Raleigh, NC 27695
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Qty	Part #	Description	Chem Y/N	Unit Price	Total Price	Item Rec'vd
1						
2						
3						
4						
5						
6						
7						
8						
		Shipping / Handling				
TOTAL						

Business Purpose / Justification:

<input type="checkbox"/> On Ice <input type="checkbox"/> Expedited Shipping	<table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 50%;">Project # (with Phase #)</th> <th style="width: 25%;">Percentage (Ex. .25)</th> <th style="width: 25%;">Total Cost</th> </tr> </thead> <tbody> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> </tbody> </table>	Project # (with Phase #)	Percentage (Ex. .25)	Total Cost									
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APPROVED: _____
 Signature of PI (Principle Investigator) Date

APPROVED: _____
 Signature of Department Head or Director Date