BOOKSTORE PURCHASE REQUEST FORM

All receipts and signatures must be original
Must have department and budget approval prior to purchase in the bookstore

REQUESTS:
Purchase Requested for: ___________________________ NJIT Phone Extension: ___________

Detailed Description of Bookstore Purchase Request:

DEPARTMENTAL APPROVALS: (Must be a one-up Supervisor Signature)
Accounting Distribution: (all boxes MUST be completed)

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Total

Amount Authorized up to: ___________

Department Approval:

Name (Please Print)  Department  Phone Extension

Departmental Approver Signature  __________________________

(Must be original, photocopies will NOT be accepted)

Budget Approval  College Business Manager, Asst to the Dean, or Budget Office Staff:

Name (Please Print)  Department  Phone Extension

Budget Office

Budget Office Approver Signature  __________________________

(Must be original, photocopies will NOT be accepted)

Approver Signatures indicate authorization of purchase and that amount requested has budget availability

FINAL PURCHASE:

Merchandise Received by: ___________________________ Date: ______________________

(Please Print Name)

Bookstore Employee Issued by: ___________________________ Final Purchase Amount: ___________

(Please Print Name)

INTERNAL USE ONLY: Receipts must be included for processing of charges by NJIT General Accounting.

Updated 04/09/2019