

Purchase Requisition Form & Direct Payment Voucher: What's New?

This is now a multi-use form. Instead of having two separate forms, the Purchase Requisition Form and Direct Payment Voucher are combined into one form. Simply select the function from the list.

Supplier information is now searchable, and supplier details can be filled in automatically.

For Direct Payment Vouchers, RF Employees are no longer required to enter address information. Just select the "RF Employee" checkbox, since we already have your address on file.

Context aware help is available by clicking any blue button labeled with a question mark.

PURCHASE REQUISITION FORM Page 1 Page 2 Page 3 Page 4 Notes

Sponsored Program Operations Purchasing Services Office, Bishop Hall, Room 28, Phone: 716.878.4144, Fax: 716.878.4039

Attachments ? Check Status ? Document ID:

SUNY RF The Research Foundation for The State University of New York BUFFALO STATE The State University of New York

Form Type:
 Purchase Requisition ?
 Direct Payment Voucher ?

Supplier Information: 24282
Search Supplier Clear Supplier RF Employee ?

Legal Name:	Sarah Projetto ?		Email:						
Address (1):	180 John Glenn Drive	Address (2):							
Address (3):			City:	Amherst					
State:	NY	Country:	US	Zip Code:	14228-2292 ?	Phone #:	716 691-6100	Fax #:	716 691-0074

Special Instructions: ?

Internal Delivery Point / Ship To Address: ?

02-PO Page 1 of 5 Version 4.3

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Attachments

Check Status

Expenditure distributions can now (optionally) be split by percentages. Check the "Split by %" box, enter the base amount, and then enter the percentages for your distribution. The dollar amounts will be calculated automatically. **Tip: if your total doesn't match your base amount because of rounding, simply uncheck the "Split by %" box and adjust your amounts manually.*

Previously saved splits can be loaded into your distribution. Select from the drop-down list.

Save a distribution split for future use.

Clear the distribution table to start entering a new distribution.

Distribution: **Load Split (Optional):** CDHS-Serv/Mnt-GNS-IT-Rochester [103419] **Split by %** **Base Amount \$** \$253.12

Project	Task	Award	Expenditure Type	Organization	(Percent)	Amount
1130237	1	73939	GNS - IT Services Other	Center for Development of Human Services	46.15	\$116.81
1130238	1	73939	GNS - IT Services Other	Center for Development of Human Services	46.16	\$116.84
1130256	1	73948	GNS - IT Services Other	Center for Development of Human Services	7.69	\$19.47
Totals					100.00%	\$253.12

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Attachments ?

Check Status ?



Itemized Expenditures & Business Purpose:

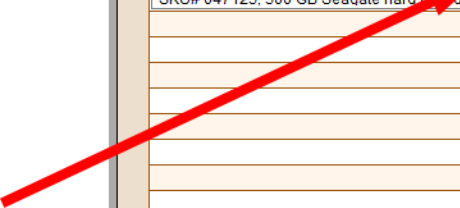
Description (must include the BUSINESS PURPOSE to justify the purchase) ?	Qty ?	Unit ?	Unit Price	Amount
SKU# 047125, 500 GB Seagate hard drive - replaces a failed hard drive in one of the project computers.	1	each	\$253.12	\$253.12
Total \$				\$253.12

02-PO

Page 3 of 5

Version 4.3

All expenditures must include a description of the Business Purpose in order to justify the purchase. Forms will NOT be processed without this justification.



PURCHASE REQUISITION FORM

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Attachments ?

Check Status ?



Preparer: Forwarded

Name: Peter Preparro Email: preparro@buffalostate.edu Phone: 878-6700

Project Director: Same as the Preparer Approved Corrections Required

Name: Sarah Projetto Email: projetto@buffalostate.edu Signature

Comments:

Is this a payment to the Project Director? If yes, you must check this box (supervisor signature is required): Yes

Supervisor (Required): Approved Corrections Required

Name: Robert Supervio Email: supervio@buffalostate.edu Signature

Comments:

I certify all goods/services have been received Signature

Grants Administration: Approved Corrections Required

Name: Email: rfgrantsmgt@buffalostate.edu Signature

Comments:

Yes No

Fiscal Designee: Approved Corrections Required

Name: Email: rfpurchforms@buffalostate.edu Signature

Comments:

Paymaster: PO Sent Approved Corrections Required

Name: Email: rfpurchproc@buffalostate.edu Signature

Comments:

The Check Status button gives simplified information about your form's progress in the workflow.

Any payments made to a Project Director MUST be approved by their supervisor. Check the Supervisor checkbox, and enter the supervisor's name and email address.



FOR YOUR INFORMATION

PURCHASE REQUISITION FORM for **Eaton Office Supply Company Incorporated** in the amount of **\$253.12** has been forwarded to **Sarah Progetto** for review.

[You can click this link to open the form.](#)

You will receive email updates throughout the workflow process to keep you updated on this form's progress. For questions about this form, please contact the Sponsored Program Operations Purchasing Services Office at (716) 878-4144.

Thank you.

Tracking No: 100598

Color coded Email Headers show you if you need to take action on a form, or if the email you received about a form is for information only.



ACTION REQUIRED

Sarah Progetto,

A new **PURCHASE REQUISITION FORM** for **Eaton Office Supply Company Incorporated** in the amount of **\$253.12** is ready for your review.

[Please click this link to open the form.](#)

If you have questions or concerns about the contents of this form, please contact the form preparer. For other questions about this form, please contact the Sponsored Program Operations Purchasing Services Office at (716) 878-4144.

Thank you.

Tracking No: 100598