

Sam Houston State University
Food/Beverage/Award/Flowers/Promotional/Gift Items Request

Contact & Vendor Information					
Department:		Date of Request:			
Contact Person:		Desired Delivery Date:			
Contact Person Phone No.:		Vendor Name:			
		Vendor Contact:			
		Vendor Phone:			
Item No.	Item Description	Qty	Unit of Measure	Unit Cost	Extended Cost
Total					
Reason for Purchase: _____					
Requestor Signature: _____					
Food/Beverage/Award signature approval required below per Finance & Operations Policy FO-19					
Direct Purpose: _____					
Specific Limitation: _____					
I certify that this purchase meets the guidelines of Chapter 3, section 6.8 of the TSUS Rules and Regulations.					
Food and Beverage Signature: _____			Vice President, Associate Vice President, Dean or Directors who report to a VP		
Awards/Gifts Signature: _____			Vice President, Associate Vice President Dean or Directors who report to a VP		
Flowers Signature: _____			Vice President only		
Promotional Items Signature: _____			Vice President only		
<u>Alcoholic beverages are prohibited purchases with the P-Card</u>					

Attach this form to the appropriate Purchase Requisition or P-Card Expense report.