



Sam Houston State University

A Member of The Texas State University System

Qhleg'gh'kplqto cvkq'Vgej pqm { 'Ugt xlegu'- Technology Purchasing- per Policy FO-IR-12

Payment Authorization Form

Attach completed form to referenced Work Order or fax to 936-294-3993.

Date: _____

Work Order: _____

Total Estimate: \$ _____

Order Information

Table with 6 columns: Quote, Recommended Vendor, Description of Purchase, Amount (\$), Additional Information, Quote Expiration. Rows 1-4.

End User Information

The following information may be reported to the Property Office. Include a separate sheet if needed for multiple designations

Department Name: _____ Username: _____ Building: _____ Room: _____

Payment Information

This form was designed to allow funding from multiple sources. To do so, indicate the quote number(s) (ie. 1,2,3,4) applied to each funding source.

In the event of a minor price increase, up to 10%, the Office of Information Technology Services will process this order without prior notification.

Prior to submitting this form, the requesting department is responsible for validating the signature authority based on the dollar amount.

Table with 9 columns: Quote(s), Fund, Organization, A, Program, Amount (\$), Name of FOP Chair, FOP Chair Signature, Date. Includes 'Input by IR' label.

Sum of Amounts to Total: \$ _____

Obtain additional signatures or forms as required, based on the dollar amount or account type.

Include the completed Food/Beverage/Award Request form per policy FO-19A if request is for a gift or award,

AVP Research: _____ Date: _____

Dean: _____ Date: _____

Vice President: _____ Date: _____

President: _____ Date: _____