Carbondale Campus End User Instructions
FORM – Purchase Requisition

Use: To request the purchase of goods or services. Procurement Services will utilize this form to enter the receipt into AIS. Once the department has online access for the entry of purchase requisitions, department representatives will enter this requisition information directly into AIS.

Access: Access the form via the E-forms web site (http://eforms.siu.edu/). Adobe Reader must be installed on your computer.

Instructions: Complete the form using the following instructions: (Unless noted, all fields are REQUIRED.)

Header Information Section: Provide basic contact/control information.

Date Prepared Date the purchase requisition is prepared by the Preparer. The system will automatically enter the current date. (Not Required)

Preparer Name Name of the person actually typing/keying information onto the form.

Requestor Name Only use if the preparer is someone other than the requestor.

Preparer/Requestor Phone No Telephone number of the Preparer or Requestor for contact purposes.

Preparer/Requestor Fax No Optional; fax number of the Preparer or Requestor for contact purposes.

Preparer/Requestor E-mail Address Electronic mail address of the Preparer or Requestor for contact purposes.

Purchase For/on Behalf of US Citizen/Permanent Resident? Select either Yes or No. If “No” is selected, answer the following question:

If for non-US Citizen/Permanent Resident, then gross up? Select either Yes, No or Not Applicable.

Fiscal Year The fiscal year in which the item(s) will be purchased. Enter fiscal year, i.e. 2005, 2006.
Distributions Information (Account to be charged) Section:
If a single Distribution (account) will be used for this requisition, complete the following fields in this section. If multiple distributions are to be used, leave this section blank and complete the Multi-Account Distribution section at the end of the form (page 4).

Chart of Accounts Search Button
To be used to aid in the determination of the Budget Purpose or Object Code value(s) to enter.

Budget Purpose
Budget Purpose value to fund the purchase. If multiple account distributions are to be used to fund the purchase, leave this field blank.

Dept Act 1
If applicable, the Departmental Activity 1 code to be used in cost accounting the expense. If multiple account distributions are to be used to fund the purchase, leave this field blank.

Dept Act 2
If applicable, the Departmental Activity 2 code to be used in cost accounting the expense. If multiple account distributions are to be used to fund the purchase, leave this field blank.

Over-riding Object, if applicable
Enter the over-riding object code; this code is only for those Units/Departments who currently use special object codes such as Student Center, University Housing, and Student Recreation Center.

Lines Information Section: Complete a Lines Information section for each Line Item. [Page 3 of the Requisition is provided if more than five (5) items are being requested.] Complete the following *Required* information for each Line Item.

- **Line Item**: Number in sequence, starting with 1.
- **Qty.**: Quantity of the item purchased.
- **Unit of Measure**: Units in which the item is acquired (e.g., EACH).
- **Brief Description**: Describe the item to be acquired. [The Description Field will only allow 240 characters. If longer, attach the full description, labeling each with the applicable Line Item Number (i.e. #1, #2, etc.).]
- **Unit Price**: Price per unit.
- **Price Extension**: Leave blank. The field will calculate automatically. (Price multiplied by quantity.)
- **Item No.**: Leave blank.
- **Delivery Site (Bldg Name & Rm. No.)**: Location for product delivery. Enter Building Name and Room Number.
Need By Date  Date by which the product/service is to be delivered. Requisition

Total  Leave blank. The field automatically sums all price extensions.

Recommended Supplier Name and Address Section:

Vendor Name/TIN Search Button  Use to look-up vendor names and TIN numbers.

Name  Required if suggesting a vendor. Enter the suggested vendor’s name.

TIN/SSN  Optional. Enter the suggested vendor’s tax ID or Social Security number.

Address  Required if suggesting a vendor. Enter the suggested vendor’s address.

P.O. Box No.  Required if suggesting a vendor. Enter the suggested vendor’s P.O. Box number.

City  Required if suggesting a vendor. Enter the suggested vendor’s city.

State  Required if suggesting a vendor. Enter the suggested vendor’s state.

Zip  Required if suggesting a vendor. Enter the suggested vendor’s zip code.

Supplier Contact Person(if any)  Optional. Enter the suggested vendor’s contact person.

Phone No.  Optional. Enter the suggested vendor’s phone number.

Fax No.  Optional. Enter the suggested vendor’s fax number.

Special Notes Information Section:

Is Equipment being purchased?  Indicate whether equipment is being purchased. Select either “Yes” or “No”. If “Yes” is selected complete the following fields, as applicable.

Is Furniture or Computer equipment being purchased?  Indicate whether furniture or computer equipment is being purchased. Select either “Yes” or “No”. Complete the following fields, as applicable.

**SEE “SPECIAL NOTES” for additional information requiring furniture and computer purchases.**
Capitalize to AIS Unit No.:
Enter the AIS Unit Number of the department/administrative unit that will receive the equipment being purchased. This is a "Required" field.

Add to Existing Asset Tag No.:
If the equipment being purchased is to be added to an existing asset, enter the SIU Tag Number of the existing asset.

If Grant, Title Held By:
If the title (ownership) of the equipment being purchased will be retained by the granting agency and SIU will not assume ownership; enter the name of the agency.

Trade-In Tag No.(s):
If trading in equipment for this equipment purchase, enter the SIU Tag Number(s) of the asset(s) being traded. (Note: Prior approval of trade-in papers is required).

Trade-In Allowance:
If trading in equipment for this equipment purchase, list the dollar amount of the trade-in allowance (Note: Prior approval of trade-in papers is required).

Is the Supplier’s owner, major officer or member of their immediate family a State employee?
Select either “Yes” or “No”. If “Yes”, refer to “Conflict of Interest Procedures” on Procurement Services’ webpage.

Is this a renewal of a previous Purchase Order?
Select either “Yes” or “No”. If “Yes” is selected, a “Previous Purchase Order No.” field will appear where the previous Purchase Order number must be entered.

Previous Purchase Order No.:
If renewing a previous Purchase Order, enter the previous Purchase Order number.

When other information is required, complete the following field:

Additional Departmental Procurement Services Forms Button
Used to connect to Procurement Services Forms Web Page. From this site, the user can access any additional forms required.

Notes To Buyer or Attach
Provide any additional information of use to the process; attach separate sheet(s) as necessary.

Fiscal Officer Name (PRINT or TYPE) (Required)
Provide the name of the Fiscal Officer. Must be printed or typed. In the case of multi-account distribution, please enter the name of the Fiscal Officer to which requisition/purchase order information should be forwarded.
Purchase Requisition Form

_Fiscal Officer Email Address (PRINT or TYPE) (Required)_
Provide the email address of the Fiscal Officer. Must be printed or typed. In the case of multi-account distribution, please enter the name of the Fiscal Officer to which requisition/purchase order information should be forwarded.

_Department Mailcode (Required)_
Provide the Department Mailcode of the Fiscal Officer entered in the Fiscal Officer Name Field.

_Approvals Section:_

_Account Fiscal Officer & Date_
Obtain approval of the account’s fiscal officer and date of signature.

_Propriety (Special Approvals, where applicable) & Date_
If special approvals are required, record them here. Provide date of signature.

_Vice Chancellor & Date_ Leave blank.

_Procurement Services_ Leave blank.

_Chancellor & Date_ Leave blank.

_President & Date_ Leave blank.

_Members of Executive Committee/Board of Trustees & Date_ Leave blank.

_Multi-Account Distribution Information Section:_ If more than one account is required, provide complete information here on all distributions.

_Line Item_ Number in sequence, starting with 1.

_Budget Purpose_ Budget Purpose value to fund the purchase.

_Dept Act 1_ If applicable, the Departmental Activity 1 code to be used in cost accounting the expense.

_Dept Act 2_ If applicable, the Departmental Activity 2 code to be used in cost accounting the expense.

_Percentage_ Percentage of total expense to be associated with the Budget Purpose/Departmental Activity account combination.

_Dollar Amount_ Enter the dollar amount of the total expense to be associated with the Budget Purpose/Departmental Activity account combination.
Fiscal Officer Signature  Signature of approving fiscal officer.

Date  Enter date of approval.

Multi-Account Distribution Total
Leave blank. The field automatically sums the dollar amount of all distributions. The multi-account distribution total must equal the requisition total.

Chart of Accounts Search Button
To be used to aid in the determination of the Budget Purpose value(s) to enter.

Special Notes:

Furniture and Computer Purchases:

Furniture and Computer Purchases should be made by the use of a P-Card, unless trade-in of existing equipment is involved.

On P-Card furniture purchases, the “Furniture Request” form and, if applicable, the “Furniture Affidavit” must be completed. Forward the completed documents to Procurement Services (Mail Code 6813).

On P-Card computer purchases, the “Computer Request” form must be completed. Forward the completed document to Information Technology.

For Furniture purchases using a purchase requisition, the “Furniture Affidavit” form must be completed (if applicable) and attached to the purchase requisition.

Click on the “Additional Departmental Procurement Services Forms” button to access the form(s) and instruction(s).

Consider the following issues:

- When a requisition total is $100,000 or greater, it must be submitted with Fiscal Officer and Vice Chancellor approval, and be accompanied by a letter of justification.

- Under the Illinois State Procurement Code, a Purchase Order to a University employee or a member of the employee’s immediate family is not allowable and is considered a conflict of interest. If such a purchase is contemplated, Procurement Services must be notified to request an exception status from the President.
Routing: Print this form, acquire the appropriate signatures, and mail it to:

Procurement Services, MC 6813.