

** Complete separate TRF's for each requisition*

Section A: (to be filled in by requestor – please print) *Please allow up to 10 business days for processing*

Requestor's Name _____ Phone/Extension: _____ Date: _____

Nature of Request *(description of project and quantity)*

Budget amount allocated per item <max. amount> _____

This request is for: Informal pricing request Quote for planned purchase

This request is for: (* asterisk denotes requestor must include asset tag numbers)

Hardware

Software

- New
- Upgrade
- Add-On/Enhancement to existing equipment *
- Roll-down *

- New
- Upgrade
- Annual Renewal

Other: _____

Disposition of existing equipment: Not Applicable

Notice: Quotes must be reviewed or requoted after 30 days.

Section B (to be filled in by TSS)

Equipment specifications *(with quote numbers if applicable.)*

Estimated cost : \$ _____ Installation cost: (if any) \$ _____ Total cost: \$ _____

Suggestions provided by: _____

Comments:

Section C: (to be filled in by Requestor's Division Office) *(Please attach additional pages if necessary.)*

Funding Source: XX0 Decision Package Lottery Instructional Equipment Categorical (specify) _____

Status: Funded Not Funded

Required Signatures: _____
Requestor

Supervisor/Division Dean

TSS Staff Initials: _____ Date form received: _____
