LONE STAR COLLEGE CYFAIR
Student Life

LONE STAR COLLEGE-CYFAIR STUDENT LIFE
PURCHASING REQUEST FORM

General Information

Club/Organization: _____

Requestors Name: _____ **Student ID:** _____

E-Mail: _____ **Phone #:** _____

Advisors Name: _____

E-Mail: _____ **Phone #:** _____

Is this request for an event? ☐ Yes ☐ No *If yes, attach a **COPY** of the Pre-event Management Form

Purchase Information

Provide a brief description of the activity that you are planning:

Date items are needed: _____

What type of purchase? ❒ Online ❒ In a store (Only one) ❒ Promotional Items

If item(s) are unavailable, can we purchase a substitute? ☐ Yes ☐ No

Allocated total we can spend on purchase: _____

Preferred Vendor Name (Only one): _____

Itemized list of items:

Item #	Description of Product (Specific)	Quantity	Unit Cost	Total Cost
		0	$ 0.00	0
				0
				0
				0
				0
				0
				0
				0
				0
				0
				0
				0
				0
			Estimated Total:	0

Club Officer Printed Name _____ Club Officer Signature _____ Date _____

Advisor Printed Name _____ Advisor Signature _____ Date _____

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