** indicates required fields*

UCONN
INSTITUTE OF MATERIALS SCIENCE

IMS ORDER REQUEST FORM

*Request Date:
*Requestor Name:
*Requestor Email:
*Requestor Phone:
Project Manager Name:
(if different from requestor)
Project Manager Email:
Project Manager Phone:

INSTRUCTIONS

1) Download form and save to computer prior to completing the form.
2) All items marked with (*) must be completed. Review order carefully before submitting.
3) Include project manager's authorization email or signature with submission.
4) Click "SUBMIT" to generate email, or email documents directly to IMSPurchasing@uconn.edu. Paper submissions will no longer be processed

You will be notified via email if we require additional information.

DELIVERY ADDRESS

*Room/Lab#:
*Department:
*Street:
*Unit:
*City/State/Zip:

ITEM, CATALOG NUMBER, AND DESCRIPTION	Unit of Measure	#/Units	Unit Price	Total
				$ 0.00
				$0.00
				$0.00
				$0.00
				$0.00
				$0.00
				$0.00
				$0.00
				$0.00
				$0.00
			Order Total**:	$0.00

NOTE: Orders for chemicals MUST be separate from supplies orders

**If order total exceeds $2,500 or special pricing involved, a quote is required and MUST be submitted with order

Supplier/Vendor Information

*Name:
Address:
Address2:
City/State/Zip:
*Phone or Website:

Special Instructions

**KFS Account to Charge:

Project Manager Authorization:

SUBMIT

Office Use Only Below This Line

Date Received	Comm#	Batch Number	Requisition #	PO#

KFS#	Object Code	Bookkeeping/Procard Approval

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