THE UNIVERSITY OF ARIZONA
BookStores

BK012148
06/18/2018

UA BookStores
1209 E. University Blvd.
Tucson, AZ 85721-0019
520.621.8861

* All Shaded Areas Must Be Completed By Department

UA Department: _____
Contact Name: _____ Contact Title: _____
Contact Email: _____ Contact Phone: _____

ACC.	SUB ACCT.	OBJECT CODE	SUB CODE	PROJECT CODE	ORG REF ID	QTY	UNIT COST	EXTENDED AMOUNT	PRODUCT DESCRIPTION
								0	
								0	
								0	
								0	
								0	
								0	
								0	
								0	
								0	
								0	

(Appropriate tax will be added at time of transaction)

Total: 0 (Excluding Tax)

Business Purpose:

This form is being submitted to us in compliance with Financial Service Manual Section 9.10. Authorized funds are available in the account(s) specified above: Gift Cards are not allowable. The goods or services requested are for bona fide business purposes of the account charged. Any changes after the Fiscal Officer/Delegates approval will void this form. Listed Department Contact and Fiscal Officer must be different people.

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PLEASE RETAIN A COPY FOR YOUR FILES

Fiscal Officer/Delegate Name: _____
Fiscal Officer/Delegate Email: _____
Fiscal Officer/Delegate Signature: _____ Date: _____
Total Maximum Amount (Excluding Sales Tax): _____

Service Billing Contact information: http://shop.arizona.edu/contact/default.asp