

S ₉₁ Exte	nsion Service					
PURCHASE ORDER FORM		PO#: FUND:				
SUBMIT INVOICE TO: (Inv	oice must show PO #)	SHIP TO:				
Mail to: WVSU Research & Development Corporation PO Box 1000, 201 Byers Admin. Building Institute, WV 25112-1000 Email to: RDAccountsPayable@wvstateu.edu		West Virginia State University Physical Facilities Inventory Control Institute, WV 25112				
Phone: (304) 204-4306	Fax: (304) 204-4349	TAX EXEMPTION#: 501	. (C)3 55	5-0708567		
VENDOR:		ADDRESS Line 1:				
PHONE:		ADDRESS Line 2:		T		
FAX:	15.15.45.15.15.15.15.15.15.15.15.15.15.15.15.15	CITY:		STATE:	ZIP:	
INVOICE #:	INVOICE DATE:	ASSOCIATED QUO		1		
ITEM #	DETAILED DESCRIPTIO	N	QTY	UNIT PRICE	TOTAL	
			1	SUBTOTAL		
AREA CONTACT				HAZ MAT FEE		
PHONE LOCATION				FREIGHT		
EMAIL				TOTAL		
			I		L	
REASON FOR PURCHASE:						
Requested by:			[Date:		
Requester's Supervisor	Date:					

Associate Dean for Extension: _____ Date: _____

Assoc. Provost/Dean & Dir.of Ag.Res. & Ext.: ______ Date: _____

R&D Budget Officer: _____ Date: _____

Executive Director, R&D:

_____ Date:____