



PURCHASE ORDER FORM

☐ Under \$10,000 ☐ Over \$10,000

PO#: _____

FUND: _____

PROJECT#: _____

SUBMIT INVOICE TO: (Invoice must show PO #)	SHIP TO:
Mail to: WVSU Research & Development Corporation PO Box 1000, 201 Byers Admin. Building Institute, WV 25112-1000	WVSU Physical Facilities Inventory Control Attn: _____ Bldg/Rm: _____ 5000 Fairlawn Avenue Institute, WV 25112
Email to: RDAccountsPayable@wvstateu.edu	TAX EXEMPTION#: 501 (C)3 55-0708567
Phone: (304) 204-4306 Fax: (304) 204-4349	

VENDOR:	ADDRESS Line 1:		
PHONE:	ADDRESS Line 2:		
FAX:	CITY:	STATE:	ZIP:

INVOICE #:	INVOICE DATE:	ASSOCIATED QUOTE # (if applicable):		
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ITEM #	DETAILED DESCRIPTION	QTY	UNIT PRICE	TOTAL

AREA CONTACT	
PHONE	
LOCATION	
EMAIL	

SUBTOTAL	
HAZ MAT FEE	
FREIGHT	
TOTAL	

REASON FOR PURCHASE:

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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: _____