DEPARTMENT REQUISITION

SANTA BARBARA COMMUNITY COLLEGE
FOR SUPPLIES, MATERIALS & EQUIPMENT
Rev 2022-02-07

1. REQUESTER INFO			
Requester Name		Date Prepared	
Department Name		**Date Required** (don't put ASAP)	
Requester Email		Ship to: ☐ Central Rec/Main Campus	
Requester's Full Phone		☐ No Shipping ☐ Wake ☐ Schott	

2. FULL BUDGET CODE (Through PROG at minimum)							
FUND	ORGN	ACCT	PROG	ACTV	ACTV	LOCN	PROJ

3. MORE BUDGET INFO

Who approves this budget (first & last name)?
Order total (including tax, fees, shipping): $
Up to $5000 = 1 quote ☐ $5000 to $99,099 = 3 quotes ☐
$99,100 & over = 1 quote to be used as the standard for a public advertised bid processed by Purchasing. ☐

4. VENDOR INFO

	Vendor 1	Vendor 2 (if >$5000)	Vendor 3 (if > $5000)
Company Name			
Representative's Name			
Email Address			
Phone No.			
(Have you worked with this vendor before? Yes, answer next row. No, submit vendor's W9)			
K Number/Prev PO#			

5. AUTHORIZATIONS/SIGNATURES

PURCHASING DEPT PREFERRED METHOD:

Obtain authorizations and submit to Purchasing via email as follows:
- Email budget approver you listed in section 3 and copy purchasing@sbcc.edu.
- Subject: "Dept Req - Vendor Name/Requester Last Name"
- Body of Email: "Please reply-all with approval or denial of the attached request."
- Attach this completed form, quote(s) and W9 as PDFs.

Authorizations can also be submitted to Purchasing with the following:

Dean/Mgr Name & Signature		Date	
EVP/VP Name & Signature		Date	
President (if requestor is EVP/VP)		Date	