CEIAS CAPSTONE PURCHASE REQUEST FORM

·	: CECMEE □	CS □	EE 🗆	ME 🗆	SICCS	Request Dat	:e:		
Course Section Capstone Instructor	Authorization:						Da	Date:	
Team Name:						Team#:			
udget Liaison:					Funding Source:				
Email:					_				
Phone#		gerjajonistis.							
Brief Description o	f Project:								
Is this a reimburse		No □				NALLID#			
If Yes Purchaser's Name: Email Address:						NAU ID# Phone#:			
A NAU Vendor Authorization form must be completed, signed and returned to NAU-FINAdmin@nau.edu or your									
	vill <i>not</i> be processed						c. , c		
 Attach a scanned 	I copy of your itemiz	ed receipt	, that includ	es each of th	e below listed	items, to estal	olish proof of	ourchase.	
		P	ARTS & SU	JPPLY REQ	JEST				
Please p	provide a detailed o	description	n for each re	equest item	and include w	eblink whene	ver possible.		
Vendor Name	Description	on of Item		Item or Catalog #	Size/Colo	Quantity	Discount Code	Total Cost (including tax & shipping)	
Preferred Shipping	- p				e Engineering B ddress with just	uilding (Bld.#69) ification.	, please specify	another NAU	
Method: Standard (3-10 day) ☐ Cheapest ☐					Other:				
Delivery Location: Other No	Engineering (Bld.# on-NAU Address:	:69) 🗆	SICCS (Bld.	#90) 🗆	Other (Blo	1.#)			
Other Addr	ress Justification:								