



College of Arts and Sciences  
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**PSYCHOLOGY DEPARTMENT PURCHASE AUTHORIZATION  
 AND ORDER FORM  
 (cannot exceed \$4999.00)**

Charge to Cost Center/WBS: \_\_\_\_\_

Cost Center/WBS Name: \_\_\_\_\_

Requested by: \_\_\_\_\_

Approval Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Purchase by Credit Card: \_\_\_\_\_ Purchase by P.O.: \_\_\_\_\_

Vendor: \_\_\_\_\_ Contact: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone Number: \_\_\_\_\_ Fax Number: \_\_\_\_\_

Reconciliation Numbers: \_\_\_\_\_

Catalog #	Description	QTY	Unit	Total Cost	Rec #- Office Use Only

**PLEASE PROVIDE COPIES OF RECEIPTS & INVOICES WITH THIS FORM TO  
 PSYCHOLOGY STAFF ASSISTANT AFTER ORDER IS PLACED**