

UNIVERSITY OF MARYLAND
COLLEGE PARK
DEPARTMENT OF CHEMISTRY AND BIOCHEMISTRY
ChemStores
AY 2011-2012
Purchase Authorization Form

Date

_____, member in the
Printed Name of Purchaser

_____ laboratory in the
Principal Investigator

Department of _____
Name of Department

is authorized to purchase items from the ChemStores. Total transaction not to
exceed \$_____. Purchase should be charged to FRS _____.

Printed Name of Principal Investigator

Signature of Principal Investigator

NOTE: It is your responsibility to obtain your Department's business office approval if required. Unless we have a blanket approval form from your business office, this form is required for each purchase.

