



OFFICE OF FISCAL SERVICES

XAVIER UNIVERSITY of LOUISIANA

COMPUTER DESKTOP/LAPTOP REQUISITION

REQUISITIONING DEPARTMENT

Requestor: _____ E-Mail Address: _____

Proposed Vendor: _____

Organization Code: _____ Available Budgeted Funds: Yes No

Fund Code: _____ Requisition # _____

Description of Goods and/or Services: _____

Model # _____

Quantity _____

Department
Head Signature: _____ Date: _____

Information Technology Center (bsmith25@xula.edu)

1.) Proposed Vendor _____

2.) Approximate Cost _____

3.) Estimated Date of Delivery _____

4.) Model # _____ Quantity _____

Approved By: _____ Date: _____

Disapproved with
Explanation: _____ Date: _____

Response time will be within 48 hours

Please submit completed form to Requisitioning Department

Purchasing Department, ATTN: Cornelia Alexis

Campus Mail: P.O. Box 121

Fax: (504) 520-7586 E-mail: calexis1@xula.edu
