Pre-Order Form Rev 10/2023

Billing Address:

North Dakota State University

NDSU Dept. 2490, PO Box 6050

Department of Mechanical Engineering

Tel: 701.231.8671

PO #:_		

Date: ___

Shipping Address: NDSU Dept of Mechanical Engineering Dolve Hall 111

1319 Centennial Blvd Fargo, ND 58102

Fargo, ND 58102	Fargo, N	D 58108-6050			
Company Name:			Date Requested:		
Address (or website):			Requested By:		
City:	State:	Zip:	Advisor/PI:		
Phone:	Fax:		Proj Name:		
Email:			Project #:		
Company Contact:			Fund #:		
Oty Part #		Description	of Goods	Unit Price	Amount

Qty	Part #	Description of Goods	Unit Price	Amount
Notes:			SUBTOTAL	
		(If known) ESTIMATE	D SHIPPING	
	NDSU's	s Sales Tax Exempt Certificate #E-5411, NDSU's TIN 45-6002439	TOTAL	

	: To be ordered by Accounting Service Center
Advisor/PI Approval:	○: To be picked up by:

An approved budget form must be on file in the ME Office prior to any purchase. This form must be filled out completely and handed in to the ME Office before any item is bought or ordered. Without this form and a budget on file, you do not have proper authorization to purchase items for any project.

Office Use Only Below						
Date Ordered		Department 2490				
Encumbered		Account	Fund	Project	Amount	
Invoice Date						
Invoice Rec'd						
Invoice #						
Voucher ID/JPM		1/3//		h - ab	d/	
Date & Initials		I/We acknowledge receipt of the above stated goods and/or services and request that payment is made in the amount and manner indicated.				

Approved for Payment: _____