REQUEST FOR PURCHASE

ND DEPARTMENT OF HUMAN SERVICES
FINANCE DIVISION
SFN 78 (Rev. 10-2013)

Clear Fields

INSTRUCTIONS: Use one form for each type of request or vendor. This is an internal DHS form used for ordering or payment when p-card is not accepted for:

1. Any item not available from Central Supply i.e. books. films, office equipment and furniture.
2. Prepaid fees i.e. subscriptions, membership dues, (attach billings), refunds, workshops (attach brochure showing agenda and registration form), reimbursement for postage meter.
3. Equipment Repairs (attach billings).
4. Information on this form should be typewritten or legibly printed.
5. Do Not Use to reimburse non-DHS employees for expenses, use SFN 10230 or contract services, use SFN 1765 instead.

Reason for Request

Vendor Name

Vendor Address (line 1)

Vendor Address (line 2)	City	State	ZIP Code

ITEM NO.	QUANTITY	DESCRIPTION	UNIT PRICE	TOTAL PRICE

Charge To: (List Division/Unit and Special Funding Sources, if any)

TOTAL

Approval (1. Program and/or 2. Division Director)

1. Date 2. Date

Prepared By

Date

TO BE COMPLETED BY FINANCIAL OFFICE ONLY

Accounting Period Date	Speed Chart	Dept. ID	Account	Class	Fund	Project ID	Activity ID	Resource Type	Resource Category	Amount

SUBMIT ORIGINAL WITH SIGNATURES AND PROPER DOCUMENTATION AND ONE COPY (TO SEND WITH PAYMENT) TO FISCAL