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# PROCARD ORDER WORKSHEET INSTRUCTIONS

## TOP SECTION

**Vendor:** List the name of the vendor from whom you are planning to make the purchase. Please do not abbreviate the name.

**Today's Date:** Please use the current date.

**Your Name:** Put YOUR name here.

**Statement of Use:** Please give a clear statement of the purpose of this order *in layman's terms*. Please be more specific than just "lab supplies" or "chemicals." Good examples are: to prepare samples, repair parts, for making membranes, sugar absorption experiments, etc.

## MIDDLE SECTION

**Approval:** The advisor's approval is required. If he/she cannot sign in person or digitally, an email approval from the advisor is acceptable.

**Cost Center / WBS #:** The funding source is required. To avoid mistakes, please get the number from your advisor rather than just the name or sponsor acronym of the grant.

**Control #:** Your control number will be issued by the CME Business Office. Please DO NOT place your order until you receive the control number.

## BOTTOM SECTION

**Is this item available from VWR?** Please check the VWR website for availability before requesting to make your purchase from an alternate vendor.

**Reason for choosing this vendor over VWR:** Please let us know your motive behind choosing this vendor. There are many valid reasons for buying from other sources (experiment consistency, formulation is better, etc.)

**Catalog #:** Please list the catalog or manufacturer's identifying number here.

**Description:** Please list the name of the item you are ordering.

**Quantity:** How many of this item you are purchasing?

**Unit:** In what type of grouping the item is sold? Examples: each, pack, pair, box, carton, gram, dozen, etc.

**Unit Cost:** The base price (i.e. the price for one unit).

**Amount:** Quantity multiplied by Unit Cost. This *should* automatically calculate for you.

**Subtotal:** The sum of all of the numbers in the "amount" column. This *should* automatically calculate for you.

**Hazmat or Shipping Charges:** Please leave this blank. This is for CME Business Office use only after invoicing.

**Comments:** this field is optional. Use it to add information you think we should know about your order.