



Seattle Institute for Biomedical and Clinical Research

1660 S Columbian Way • S-151F • Seattle WA 98108
206.764.2730 • Fax 206.764.2742
www.sibcr.org

PURCHASE ORDER

DATE \_\_\_\_\_

AUTHORIZED BY \_\_\_\_\_

VENDOR INFORMATION BUDGET INFORMATION

NAME \_\_\_\_\_

SIBCR ACCT# \_\_\_\_\_

ADDRESS \_\_\_\_\_

REDIS PROJECT # \_\_\_\_\_

PHONE \_\_\_\_\_
(WITH AREA CODE)

PO # \_\_\_\_\_

ORDER # \_\_\_\_\_

Table with 5 columns: CAT#, DESCRIPTION, QTY, UNIT COST, COST EXT.

SUBTOTAL
WA STATE TAX
SHIP/HANDLING
TOTAL

Justify research-related purpose of this expenditure with detail:

Three horizontal lines for justification text.

SHIPPING INFORMATION BILLING INFORMATION

ATTN \_\_\_\_\_

SIBCR

BLDG/RM \_\_\_\_\_

1660 S. COLUMBIAN WAY MS 151F

BOX # \_\_\_\_\_

SEATTLE, WA 98108

PHONE \_\_\_\_\_

SIBCR Accounting Approval

SIBCR OFFICE USE ONLY

WA STATE USE TAX: Y N NA

DATE ENTERED \_\_\_\_\_

SENT BY \_\_\_\_\_

DATE SENT \_\_\_\_\_

GL CODING \_\_\_\_\_