SUNY at STONY BROOK **MATERIAL AND SERVICES REQUISITION/VOUCHER**

DEPARTMENT:		ACCOUNT DIRECTOR:			**INVOICE #**
ACCOUNT DIRECTOR'S ADDRESS:					INVOICE DATE:
REQUESTORS NAME		TELEPHONE NO.		DELIVERY ADDRESS	

INSTRUCTIONS

Enter all information requested (including Charge Account information) and obtain signatures of authorized official or project director. The approval of the authorized signatory means that State and Research Foundation accounts will be charged on the basis of this completed form.

ALL USERS - Send all copies directly to the Service Unit. A copy will be returned to the department/project director after completion of work.

SERVICE UNITS - Enter actual cost after work or service is finished, complete summary of charges and forward to the appropriate Business Office. Reqisitions for charges to Research awards must be forwarded to OGM for approval of the expenditure. OGM will forward approved requisitions to Accounting for payment.

Materials or Services Requested and Special Instructions	References or Category No.	Quant.	Est. Price	Estimated Total	Total To be completed by Service Unit
Poster Printing Services		1	$17.00	$17.00	$17.00
			INVOICE AMOUNT		**$17.00**

APPROVAL OF ACCOUNT DIRECTOR	**GRANTS MANAGEMENT OFFICE**	**SERVICE UNIT APPROVAL**
	SPONSOR:	
Authorized Signature **Date:**	Grant termination date	
The approval of the authorized signatory means that State & RF	Approval OGM	
accounts will be charged on the basis of this completed form	Research Foundation only:	

Department complete

SUMMARY OF CHARGES AND CREDITS (DISTRIBUTIONS)		**RESEARCH FOUNDATION INFORMATION**				
CHARGE	**State Acct Number**	**Expend Code**	**Project**	**Task**	**Award**	**Organization**	**DR. Amount**
							$17.00
Service Unit Complete							
CREDIT	**State Acct Number**	**Expend Code**	**Project**	**Task**	**Award**	**Organization**	**CR. Amount**
	900857						**$17.00**

ACCT0001 09/01