**PURCHASE REQUISITION #**

Board Item __________________

Board Date __________________

---

**TEXAS TECH UNIVERSITY HEALTH SCIENCES CENTER**

**HSC PURCHASING OFFICE ROUTING SHEET**

---

A. **REQUESTING HSC DEPARTMENT:** ________________________________

   **CONTACT PERSON** __________________________ **PHONE #** ________________

B. **STATEMENT OF NEED:** __________________________________________

C. **DESIRED START DATE:** ________________ **END DATE:** ________________

D. **EXPENSE FUND #** __________________________________________

---

**REVIEW AND RECOMMENDATION SIGNATURES**

I have thoroughly reviewed the attached agreement or contract and recommend entering this agreement as written. In addition, I can confirm that we do have available resources to fulfill all of the obligations contained in this agreement or contract, and it is within the mission of this department or area of responsibility. This agreement or contract will produce benefits to TTUHSC and I feel it is a proper activity to enter into.

---

E. **DEPT CHAIR/ASSOC.CHAIR** ____________________________ **DATE** __________

F. **ASST/ASSOC DEAN/VP** ____________________________ **DATE** __________

G. **DEAN** ____________________________ **DATE** __________

H. **ACCOUNT MANAGER** ____________________________ **DATE** __________

---

**REVIEW AND APPROVAL SIGNATURES**

I. **AVP PHYSICAL PLANT*** ____________________________ **DATE** __________

(*required for space lease only)

J. **HSC PURCHASING OFFICE** ____________________________ **DATE** __________

K. **EXECUTIVE VICE PRESIDENT** ____________________________ **DATE** __________

L. **PRESIDENT** ____________________________ **DATE** __________

M. **GENERAL COUNSEL** ____________________________ **DATE** __________

---

* ATTACHMENT A

Page 1

HSC OP 72.06

January 31, 2013