



**Bill Directly to GLAVREF**

Post Office Box 25027

Los Angeles, CA 90025

**Purchase Requisition**

(If Yes, Performance Period is Required Below)

*Please do not leave any fields blank. ALL fields are mandatory. Fields left blank will cause the form to be returned to the PI. To find your fund number, please refer to your financial statements.*

**Date**

**Purchase Requisition Number**

**Recurring**

**Yes**

**No**

**Vendor**

**Company Name**

**Ship To**

*\*Due to Ongoing Covid/Pandemic Requirements, deliveries to home addresses are allowed until further notice.*

Street Address

Attention

City

State

Zip Code

Company Name

Phone

Street Address

Sales Representative

(Include Building and Room)

City

State

Zip Code

Phone

Delivery Date Required

**Research Justification**

**Fund Number (Mandatory) PI Approval**

**Date**

**VA Project Number**

**Fund Approval/Allocation**

**Date**

**Approved Signature, Brent Davis GLAVREF Research and**

**Education Officer**

**Date**

**PI Signature**

**Date**

**Greater Los Angeles Veterans Research & Education Foundation**

11301 Wilshire Blvd., Building 114, Room 218 Los Angeles, CA 90073 tel 310.312.1554 [www.glavref.org](http://www.glavref.org)



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**Catalog Number**

**Description**

**Quantity**

**Unit of Measure**

**Unit Price**

**Total**

**Subtotal**

**Sales Tax (@9.50% Enter Manually)**

**Shipping and Handling (Enter Manually)**

**Grand Total**

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**GLAVREF** Purchase Requisition “How To”

1. **Recurring** – choose the check box next to Yes or No, to indicate the type of Purchase Requisition.
  - o Yes -- when chosen, means the Purchase Requisition being issued is recurring or sometimes referred to as an OPEN PO where a performance period is required. The total amount in the Purchase Requisition will be available within the performance period indicated.
  - o No -- when chosen, means the Purchase Requisition being issued is a regular PO and for one-time use only. The performance period dates are not required.
2. **Vendor**
  - o All fields are required to be entered.
3. **Ship To:**
  - o Attention: Enter the name of the person receiving the delivery. This is required.
  - o Company Name: Please indicate VAMC/West Los Angeles or VAMC/ Sepulveda, depending on the location of the PI or delivery.
  - o Street address (include building and room) – this is required information for the vendor to have an accurate location of delivery.
  - o City, State, Zip Code – as indicated
  - o Phone – contact number of the person receiving the delivery.
  - o Delivery Date required – indicate the date when the delivery is required.
4. **Research Justification**
  - o This is a required field. The PI must indicate that the requested items to be purchased are research related.
5. **Fund Number**
  - o This is the assigned fund number to the PI’s research project. If unknown, Brent Davis will provide this information.
6. **PI Approval**
  - o Required. PI must sign/electronically sign Purchase Requisition.
7. **Date**
  - o Required. Date PI signed Purchase Requisition.
8. **VA Project Number**
  - o VA Assigned Project Number Used to Identify Related Projects in the VA System.
9. **Fund Approval and Allocation**
  - o Required. Brent Davis, Research and Education Officer Signs to Indicate Approval.
10. **Date**
  - o Required. Date Brent Davis, Research and Education Officer Signs and approves Purchase Requisition.

**Catalog Number**

- o Catalog Identification Number of Item Being Ordered
11. **Catalog Number**
    - o Catalog Identification Number of Item Being Ordered
  12. **Description**
    - o Description of Item Being Ordered
  13. **Quantity**
    - o Number of Items Being Ordered
  14. **Unit**
    - o Unit of Measure of Items Being Ordered
  15. **Unit Price**
    - o Unit Price of Items Being Ordered
  16. **Subtotal**
    - o Total Cost of Items Ordered Prior to Tax, Shipping, Handling Costs.
  17. **Sales Tax** (If Applicable)
    - o If Applicable, 9.5% Sales Tax. (Manual Entry)
  18. **Shipping and Handling**
    - o Estimated Shipping/Freight Costs if Available. (Manual Entry)
  19. **Grand Total**
    - o Total of All Cost