

AUTHORIZED PURCHASER FORM

BIOCHEMISTRY STOCKROOM

BIOCHEMISTRY/BIOPHYSICS BLDG. – RM112

PHONE: (979) 845-1524

Department: _____

Billing Address (TAMU Mail Stop):

Professor (PI/Lab Director):

Fax: _____

Phone: _____

E-Mail: _____

UPDATED ACCOUNT LIST

Account #	Description	Purchase Order # Required (Y/N)

UPDATED PURCHASER LIST

(Specify members who should be added/taken off account)

Name (Print)	Signature

PI/Lab Director Signature: _____ Date: ____/____/____