**Section Purchase Approval Template**

Effective today, section staff requesting purchases should begin using the purchase approval template below.

The key change is that funding information must now be provided upfront. Many of you already do this, but it will now be required for approval. In addition, staff submitting purchases should indicate that they have consulted with managers to ensure that requested funds are available.

Upon management approval, the Resource Team will either:

1. confirm availability of sufficient funds, or
2. notify the purchaser that sufficient funds aren’t available and work with the program to identify an alternate funding source.

**˅˅˅ TEMPLATE ˅˅˅**

**TB/HIV/STD Section Purchase Request**

|  |
| --- |
| Staff must obtain approval from their Branch Manager & Director prior to submitting a requisition in CAPPS. Once the requisition is entered & approved in CAPPS, the requisition is then sourced to a purchaser who will write the Purchase Order (PO) that will be submitted to the provider/vendor. A requisition must be entered **no less than 2 months prior** to the event to allow for sufficient time to issue the PO.  Staff must not purchase or receive goods or services without a PO **or** prior to the PO being issued.  |

**Name of the Requester:**

**Amount of the Requisition:**

**Item Description:**

**\*Is the fund available to cover the amount of the requisition?  Type Yes or No:**

**\*If yes, provide the funding information below.**

**-Project Grant:**

**-Dept ID:**

**-Program Code:**

**-Fund:**

**-PCA/Class:**

**-Budget Period:**

**-Budget Account Code:**

**\*If no, please discuss with your manager prior to submitting the purchase request template.**

**If staff need assistance, please reach out to Resource Coordinator staff.**

**Justification for goods or services:**

**Branch Manager Name:**

**Type Approved or Denied and Type Date:**

**\***If approved, the Branch Manager will forward this email to the Director for approval.

\*If Denied, the Branch Manager will reply to the requester.

**Director’s Name: Felipe Rocha or Greg Beets and Type Date:**

**Type Approved or Denied:**

\*If approved, the Director will forward this email approval to the Branch Manager, Requestor, SSO/Support Staff or designee to enter the requisition in CAPPS & copy the Resource Coordinator (Maria Davis).

\*If Denied, the Director will reply to the Branch Manager.