



PURCHASE ORDER FORM

Please see the instructions on page two for guidance in completing this form.

All capital equipment (>\$5,000) and computers/laptops must be purchased by VHF.
Personal reimbursement for these items is **not** allowed. Contact VHF directly to order.

Authorized Signature	Date
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Vendor Information Name _____ Address _____ _____ Phone _____	Budget Information VHF Acct # _____ PO #: _____ IRB# _____
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Purchasing Requirements Summary
 For federal purchases ≤ \$10,000, the use of VHF approved vendors is encouraged.
 Federal purchases > \$10,000 require a Vendor Justification Form, see Policies and forms at <https://veteranshealthfoundation.org/>
 All purchases > \$250,000, regardless of source, please contact the VHF administration before proceeding.

All individuals making purchases on behalf of VHF must follow the conflict of interest standards outlined in Appendix A of VHF's Procurement Policy as well as VHF's other conflict of interest policies. Forms and policies can be found at: <https://veteranshealthfoundation.org/>

Order Confirmation #				
Item #	Description	Qty	Unit Cost	Total Cost
				\$
				\$
				\$
				\$
				\$
				\$
				\$
				\$
				\$
Subtotal				\$
Ship/Handle				\$
PA State Tax				\$
Total				\$

Justify the project-related purpose of this expenditure

Shipping Information Attention _____ Building/Room # _____ Address _____ City, State Zip _____ Phone/Ext _____	Billing Information Veterans Health Foundation University Drive C Building 30 Ground Floor Pittsburgh, PA 15240 412.360.2403 (v)
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VHF OFFICE USE ONLY	
VHF Approval _____	PO# _____
VAPHS BioSafety Officer Approval (if Applicable) _____	SAM.gov Status Checked _____
VHF Funds Approval _____	Chart of Account Name and # _____



All orders for supplies (e.g. office, lab, animal, clinical, etc.), services, and equipment will need a PO completed and emailed to laura.soule@va.gov.

In addition to this PO, a Vendor Justification form is required for federal purchases equal or greater than \$10,000 per PO.

Filling out the PO:

Complete the Vendor Information and Budget Information sections. Make sure you enter the VHF Account # as well as the PROSPECT project ID (if applicable). If you are allocating a purchase between two or more accounts, indicate multiple VHF Account #s and the percentage per account. PO # will be assigned by VHF.

An authorized signer on the VHF account must sign the PO. The signed PO serves as authorization for payment by VHF upon receipt of the invoice from the vendor.

Complete the order information using the vendor catalog number, description, quantity, unit cost and extended cost.

Justify the research/education-related purpose of the order in detail - **directly state how this purchase is related your project and/or to Veteran research/education.**

Examples:

- Laboratory/clinical supplies required for project experiments in Specific Aim 3
- Service necessary to carry out the project objectives
- Software necessary to analyze critical project data
- Software for manuscript preparation for results of this project

Complete the shipping information section.

Send the completed, signed order request to laura.soule@va.gov.

Additional Purchasing Steps

Receipt of incoming packages must be verified and inspected for damage, defects or errors as soon as received. Items must be identified by the information available on the packing slip included with the order. If discrepancies or defects are noted, please contact VHF immediately.

The packing slip must be sent to the VHF administration at laura.soule@va.gov. If there are discrepancies or damaged items, please provide description when sending in the packing slip. This process will serve as documentation to verify discrepancies between items ordered and items shipped. If there is no packing slip, please let VHF know and you will be provided a Replacement Packing Slip form to sign. VHF cannot pay invoices without this reconciliation.