## SMG Purchase Requisition

Account No	Cost Center	Event Number
	For Accounting Use	e Only

Building:	DOME	<u></u>	D	Date Requested: 05/25/17				
Requestor's Name:	Victoria Costantino			When Needed:				
Requestor's Dept:	Guest Services		Cu	stomer Pick Up		Delivery		
				Unit of				
Item Number	İ	service Description (Detailed to Spec)	Quantity	Measure	Price	Extensio	n	
	Apple iPad 32gb (Silve		24	ea		\$	-	
		es Case for iPad (Black)	24	ea		\$	-	
	Universal Stand E-Rea	der BK	24	ea		\$	-	
						\$	-	
						\$	-	
						\$	-	
						\$	-	
						\$	-	
						\$	-	
						\$	-	
						\$	-	
						\$	-	
						\$	_	
						\$	_	
						\$	_	
						\$	_	
						\$	_	
Purpose or use:	iPad	ls for GS Desk Reps; Training	•		Total	\$	-	
Reason:	Digital integration, seamle							
Special Instructions:								
Capital Project #				OR	DER PLACED B	Y Date Orde	red	
	s a Disadvantaged Business Ente E Certification # in the space prov							
DBE Certification #								
Contact								
Address								
City, State, and Zip Code								
Fax								
Phone								
Email address				Equity Li	iaison Officer	Date		
P.O./Contract number as	Approval:	Laurie Ducros						
	Ammunicali	Manager	Signature			Date		
	Approval:	Department Head	Signature			Date		
(Purchasing to complete	e) Approval:	David Weidler						
	A	Director of Finance	Signature			Date		
	Approval:	Alan Freeman General Mgr *Combined total over \$5,000.00	Signature			Date		
	Approval:	Doug Thornton						
		Regional VP *Projects with Combined Total Over \$5,000 *All LSED Administrative Expenses	Signature			Date		
	Approval:	Kyle France						
		LSED Board Chairman	Signature			Date		