Vivaria Purchase Requisition

Request Date: ___________________________     Date Required: ___________________________

Requested by: (Name/Dept) ____________________________

PI's Signature: ___________________________ Protocol # ___________________________

FAU (required): ____________________________

Dept. Financial Administrator Confirmation: ___________________________ (i.e. MSO, Analyst)

Vivarium (V1): ☐ Life Sciences    ☐ Spieth Hall
Vivarium (V2): ☐ Annex    ☐ Boyce
Vivarium (V3): ☐ New Psychology

Please place an order for:

☐ Animals

<table>
<thead>
<tr>
<th>Qty.</th>
<th>Species</th>
<th>Catalog #/Vendor</th>
<th>Sex</th>
<th>Specifics</th>
</tr>
</thead>
<tbody>
<tr>
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<td></td>
<td></td>
<td>Male</td>
<td>Female</td>
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<td>Male</td>
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<td></td>
<td></td>
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<td>Male</td>
<td>Female</td>
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</tbody>
</table>

Quarantine Instructions: __________________________________________

Room/Caging Requirements: _______________________________________

☐ Supplies (i.e. Special Food, Bedding, Cages, meds that require Vet's License, etc.)

<table>
<thead>
<tr>
<th>Description</th>
<th>Quantity</th>
<th>Catalog #/Vendor</th>
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</table>

When complete, please turn in to the Animal Tech in your vivaria. Form must be completely filled out before order will be placed. Dept. must confirm FAU information.

***Once the order has been placed by the vivaria manager, it cannot be cancelled.

For Vivaria Use Only

Date order was placed: ___________________________
Vendor: _______________________________________
Estimated Order Total: $ ______________________
Vivaria Manager's Signature: ____________________

For OCV Use Only

PCT Date: ___________________________
Journal #: ___________________________
Order Total $: _______________________
CC to Dept: _______________________

Rev: 10/24/2016