

APPLE PURCHASE ORDER
 Information Technology Services
 Southern Illinois University Edwardsville

Complete this form, including the Fiscal Officer's signature, and attach a detailed copy of your Apple's shopping cart.

Contact Name: _____ Contact e-ID: _____ Contact Phone: _____

End User's Name, Lab Description, or Special Purpose Description: _____

End User's e-ID: _____ End User's 800#: _____ End User's Phone: _____ Building/Room #: _____

	Item	Quantity	Description
<input type="checkbox"/>		_____	iMac
<input type="checkbox"/>		_____	Mac Book Pro
<input type="checkbox"/>		_____	Mac Book Air
<input type="checkbox"/>		_____	iPad
<input type="checkbox"/>		_____	Other Apple Products

BP Name: _____

BP Number: _____

Estimated Cost: _____

Fiscal Officer Name: _____

Fiscal Officer Signature: _____

Date: _____

1. Send completed form and "Your bag" to ITSApprovals@siue.edu
2. Once approved by ITS Approvals, send completed form, "your bag", and email to ITS_leasing@lists.siue.edu or Campus Box 1068 or fax to ext. 3599

All Apple purchases will be assessed additional fees for jamf service. Please see https://www.siue.edu/its/fac_staff/lease_program/apple_purchase_program.shtml for additional information.