

Hampton University

Hampton, Virginia 23668

Office of the Director of Purchasing

(757) 727-5477

Fax (757) 727-5478

**PURCHASE EXPEDITER REQUEST**

DATE: \_\_\_\_\_  
TO: PURCHASING DEPARTMENT  
FROM: \_\_\_\_\_  
EXT: \_\_\_\_\_  
SIGNATURE: \_\_\_\_\_

ACCOUNT NUMBER: \_\_\_\_\_  
COMPANY NAME/PERSON: \_\_\_\_\_  
PURCHASE ORDER NUMBER: \_\_\_\_\_

- \_\_\_\_\_ SHIPMENT—NOT RECEIVED
- \_\_\_\_\_ PARTIAL ORDER RECEIVED
- \_\_\_\_\_ CANCEL ORDER
- \_\_\_\_\_ INCORRECT ITEM SHIPPED
- \_\_\_\_\_ DAMAGED SHIPMENT (keep original packing for inspection)
- \_\_\_\_\_ DUPLICATE SHIPMENT
- \_\_\_\_\_ DISSATISFACTION OF SERVICES/ITEMS

REASON: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

REMARKS: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

ACTION: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

The undersigned states that he/she has prepared the above documentation and that the facts and other data set forth are complete and accurate to the best of the undersigned's knowledge and belief.

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Investigator or Initiator (Please Print or type)

Signature

**PURCHASING DEPARTMENT USE ONLY**

Approved

Disapproved

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Doretha J. Spells, VP for Business Affairs and Treasurer

Date