



**Office of Consumer Credit Commissioner**  
 2601 North Lamar Boulevard  
 Austin, TX 78705-4207  
 Purchase Request Form

Directions: Use this form to request items not already available through supply. Requestor should complete and sign the form and forward it to their supervisor. Upon supervisor approval, the form will be forwarded to the chief accountant. Upon approval by the chief accountant, the form will be forwarded to the purchaser. A request may be denied at any level. The requestor may ask to receive a copy of the completed form showing the purchase order number and date of issue.

Recommended Vendor

Visual Edge IT

Address: 4616 W Howard Ln, Bldg 9, Ste 950 Phone: 713-695-3900  
Austin TX 78728 Fax: \_\_\_\_\_

Class	Item	Product number and/or brief description	Quantity	Cost per unit	Extension
939	55	Maintenance, Sharp A3744, 12 months	12	\$115.15	\$ 1381.80
					\$ -
					\$ -
					\$ -
<b>Total</b>					<b>\$ 1381.80</b>

Reason for request: maintenance for full year

DIR-CPO-4428

**Detail Description (REQUIRED if not indicated above):**

Requestor: Thomas White *Thomas White* Date: 09/26/23

Department: IT Phone: 512-936-7650

**Approval**

Department Supervisor: \_\_\_\_\_ Date: \_\_\_\_\_

Accounting Manager: \_\_\_\_\_ Date: \_\_\_\_\_

Purchaser: Alexandra Jones Date: \_\_\_\_\_

PO Number Issued: 24-027 Date: 09/29/2023

PCC Code: I

Accounting Only: Comp Objt: 7367 **AY:** 2024