

AUTHORIZATION TO PICK UP LIMITED PURCHASE ORDER FORMS*

Please issue 1 (one) package of LPOs to the

Department of _____

Phone Number _____

The LPOs will be picked up by _____

(A valid UAB ID must be worn by person authorized to pick up LPOs)

Oracle Account String _____

Authorized Departmental Signature _____

Verified by _____

LPO package begins with # _____

Received by _____

Date _____

***Bring this form and your UAB ID to 620 AB to pick up LPOs.**