 **Request for Internal Services Quote**

It is imperative that this Quote is completed before any goods are supplied or services performed on behalf of the Purchasing Business Unit.

**Buyer Initiated Details:** (*Please specify all information clearly.)*

|  |  |  |  |
| --- | --- | --- | --- |
| **Date RISQ raised** |  | **Purchasing Business Unit** |  |
| **Finance Officer** |  | **Phone** |  | **Email** |  |
| **Description of Goods or Services Purchased** |  |
|  |
|  | **Estimated Amount** |  |
| **Enter Chartfields:** *(Optional)* |
| **Operational Unit** | **Site** | **Fund Code** | **Function** | **Expense Account** | **Project ID** | **Free Form Tag** |
|  |  |  |  |  |  |  |
| **Operational Unit** | **Site** | **Fund Code** | **Function** | **Expense Account** | **Project ID** | **Free Form Tag** |
|  |  |  |  |  |  |  |

**Authorisation of Expenditure:**

|  |  |  |  |
| --- | --- | --- | --- |
| **Budget Approved** | [ ]  Yes [ ]  No | **Budget Holder**  |  |
| **Signature** |  | **Date** |  |  |
| **Charge Approved** | [ ]  Yes [ ]  No | **Financial Delegate** |  |
| **Signature** |  | **Date** |  |
| **Seller Pricing Quote:** (*Please specify all information clearly.)* |
| **Date of Quote** |  | **Billing Business Unit** |  |
| **Quoting Officer** |  | **Phone** |  | **Email** |  |
| **Description of Goods or Services Provided** |  |
|  |
| **Amount** |  | **Sellers Reference** *(e.g. Job #)* |  |
| **Operational Unit** | **Site** | **Fund Code** | **Function** | **Revenue Account** | **Project ID** | **Free Form Tag** |
|  |  |  |  |  |  |  |