# **PRF Cycle**

Complete purchase request form (PRF) Submit to Student Council Treasurer

Treasurer(s) review and approve

PRF is submitted to Office of Student Affairs Office of
Student
Affairs
reviews and
approves

PRF sent to main campus for purchase

\*This process takes about 3 weeks from beginning to end



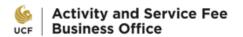
# Complete PRF Packet Includes...

• PRF

Invoice

Flyer (if food is being ordered)





#### **Purchase Request Form**

#### Fiscal Year 2017 - 2018



Organization Name				Allocation # or Budget Line		Today's Date			
Initiator (print)			Phone	Advisor Nar	me (print)	Date of Event (if a	ipplicable)		
E-Mail Address				Advisor Sig	nature	Event Location (if	applicable)		
Recomn	Address City/State/Zip					(A&SF Busines	s Office Use Onl	y)	
Item #			otes and/or any documentation	Quantity	Unit Price	-	「otal		
Justification / Us Benefit to the St	nt Options: Cred se of item(s) - REQ cudent Body - REQU	UIRED	☐ Check ☐	signature lis	Grand Total	those Student Org	anizations registe	ered	
with the Office be made at lead shipping times of Financial Training	of Student Involver st TEN (10) BUSIN of the vendor. All ping. All authorized	ment that h NESS DAYS urchse requ signatories	pave received an SGA-approved prior to the time that items a lests must follow all guidelines so must have successfully comply will abide by them.	allocation or not	bill may request funds for pus s are required. Please take i e Student Government Finan	urchases. All purchanto consideration in the A	ase requests need required producti &SF Business Offi	d to ion/ ice's	
IDT BY: Othe	or 🗌 ASF 🗌	Dept Nar	me	Dept #	ŧ	Acct #			
P.O. [	P-Car	rd 🗌	P-Cardholder Name						
Authorized Sign	ature (1)	Date	Authorized Signature (2)	Date	ASFBO Accountant Signatu	ire Date	ASFBO Requisition Approver	)	
Print Name			Print Name		Requisition #			ate	

# **Completing a PRF**

- All requests for purchases must be submitted via a purchase request form (PRF) to the Student Council Treasurer 3 weeks prior to the date of the event
- Vendors paid over phone by main campus accountant via credit card
- Vendors have to agree to be paid by credit card over the phone
  - Takes up to three weeks <u>after</u> the event date for a check to be cut



# Completing a PRF cont...

 You need to fill out one PRF for each vendor you are using (either business/individual)

For speaker fees/honorariums, must provide invoice and W9

 For online purchases, put vendor's website on the address line and attach document with a screenshot of your shopping cart (with all of the items you want to order in it)



#### Activity and Service Fee Business Office

**Purchase Request Form** 

Fiscal Year 2017 - 2018

Must be this year's PRF



UCF Your organization's name MUST be on this form

organization's						-			
name MUST be								ust have the date	
on this form	Organization Name						Todayle Data		
somewhere	Add group	o name		955				ou submitted it to Casey, or Srikar.	
<b>→</b>	Initiator (print)		Phone	Advisor Nar		Date of Event (if ap	oplicable)	∠ Casey, or Strikar.	
	JSoraya Sn	nith	407-266-1355	Soraya	Smith	MUST HAVE	E	ust have the date	
	E-Mail Address			Advisor Sig	nature	Event Location (if a		of the event	
	Soraya.Sı	mith@ucf.edu				UCF COM		of the event	
						(A&SF Business	Office Use Only)		
	Recom	mended Vendor Publix		Contact	Event Planner's Name				
		Address	10615 Narcoossee Rd, C	orlando, FL 3	32832	Must use th	e Publix	*	
		City/State/Zip Orlando	·		107 <b>-</b> 277-1089	by Moss	Park		
					107-217-1009	<b>←</b>			
		Email	if applica	ble	1				
	Item#	Description - Attach all quo	tes and/or any documentation	Quantity	Unit Price	To	otal		
	1	Deli Se	elect Sub	2	26.99	\$ 3	6.99	Must list each item	
	2	Apple/C	heese Tray	1	14.99	\$ 1		individually as it is	
	3	Lerr	nonade	1	3.99	\$ 3.99		on the invoice –	
	4	Swe	eet Tea	1	3.99	\$ 3.99		em name, quantity	
								and price	
A justification	endor Payme	ent Options: Credit Card	Check		Grand Total	\$ 7	6.95		
and benefit	Justification / Us	se of item(s) - REQUIRED							
must be given			nat this order will be ເ	sed for					
<b>→</b>		tudent Body - REQUIRED							
		this help students?							
	Only those indi	viduals or positions on the A8	SF Business Office's authorized s	ignature list	may sign below, and only ti	nose Student Organ	izations registere	d	
			nave received an SGA-approved a						
			prior to the time that items an						
	shipping times of the vendor. All purchse requests must follow all guidelines set forth by the Student Government Finance Code and the A&SF Business Office's								
	Financial Training. All authorized signatories must have successfully completed the A&SF Business Office's Financial Training. By signing below, you are certifying that you understand these rules and will abide by them.								
Î	IDT DV. Other					Acct#		<b>1</b>	
	IDT BY: Othe	er 🗌 ASF 🦳 Dept Nar	me	Dept #	# <u></u>	Acot #		<b>-</b>	
ONLY Srikar, Phil or Cole	P.O. [	P-Card	P-Cardholder Name						
may sign off on	Authorized Sign	ature (1) Date	Authorized Signature (2)	Date	ASFBO Accountant Signatur	re Date	ASFBO		
these							Requisition Approver		
→ ·	Print Name		Print Name		Requisition #		Initials Da	te	
	Srikar R		Philip Wessles					-	
	porinai IX	Cuuy	I much AACOOICO		I			1	



#### Customer Invoice

Cornerstone at Lake Hart 10615 Narcoossee Rd Orlando, FL 32832 Phone (407) 275-5507, Fax (407) 275-5509



Customer ID Customer Information

Company

E+04

**UCFCOM** 

Student who placed the orders name and contact information

Ouota	EventID	Event Name	Frank Data	Engel Time	Distant Data	D: . L
Quote	EveniiD	Event Name	Event Date	Event Time	Pickup Date	Pickup Time
	22243	College Function	1/13/2017	11:30 AM	1/13/2017	10:00 AM
	Quantity	Item Description	Pric	e Amount	Notes	
	1	PBX SUB SELECT SM	\$26.99	\$26.99	Publix Small Sub pieces to be Veg cheese *** 4 pieces Roast B Turkey / Provolor cheeses	gie & Provolone Beef / 4 pieces
	1	PBX SUB SELECT SM	\$26.99	\$26.99	Publix Small Sub variety subs*	Selections * All
	2	EP Deli	\$3.99	\$7.98	1 Gallon Lemona Sweet Tea	ide / 1 Gallon
	Ħ	EP Fresh Produce	\$14.99	\$14,99	Apple & Cheese	Tray
(36)			Estimated Tota	\$76.95		
			Estimated Service Fe	<b>e</b> \$0.00		
			Deposi	\$0.00		
			Estimated Balance Due	e \$76.95		

Event Planner:

Lei Lee

**Date Event Planned:** 12/13/2016

\*Prices may vary slightly from this quote. Estimated Balance Due does not include tax or delivery.

# May 16th • 5-7pm AN ALL CLASS EVENT

Friendly Competition and Celebration of Completion of Another Year of Medical School

GAMES
OPERATION
TUG-O-WAR

3-LEGGED RACE

POPCORN & SNO CONES GIANT
INFLATABLE
OBSTACLE
COURSE

# Olympics Olympics

Sponsored by







Your
Organization's
name MUST
be on this
form
somewhere
<b>→</b>

1		
de	١	
GOA	ı	
	1	

**Activity and Service Fee** UCF Business Office

Recommended Vendor Papa John's

Address

**Purchase Request Form** 

Fiscal Year 2017 - 2018

Contact

Ask for name

**Grand Total** 

Must be this year's



order with.

ALSO - GIVE YOUR NAME when ordering for the

\$ 75.00

Must have the date you submitted it to Casey or Srikar. Must have the date of the event

> Must list each item that you ordered.

Can put delivery

fee and tip

together. The

numbers on the

receipt should line

up with what is

listed here

rganization Name		Allocation # or Budget Line	Today's Date	submitted it
Add group name		955	MUST HAVE DATE SUBMITT	Casey or Srik
itiator (print)	Phone	Advisor Name (print)	Date of Event (if applicable)	<del>(</del>
Soraya Smith	407-266-1355	Soraya Smith	MUST HAVE	Must have t
-Mail Address		Advisor Signature	Event Location (if applicable)	
Soraya.Smith@ucf.edu			UCF COM	date of the ev
Decemended Vender Pana John's		Ask for name	Ask for the person's name v	vho you placed the

City/State/Zip Orlando, F1 32828  Email			Phone	(407) 658-9191	receipt and give your phone number to instructions	or delivery
	Item #	Description - Attach all quotes and/or any documentation	Quantity	Unit Price	←	
	1	Cheese Pizza	4	14	\$ 56.00	
	2	Pepperoni	4	14	\$ 56.00	
١	3	2L soda	4	3	\$ 12.00	t list each it
l	4	Delivery Fee & tip	1	15	0.45.00	t you order
ı	5	Discount	1	-64		n put delive

10727 Narcoossee Rd.

Vendor Payment Options: Credit Card Justification / Use of item(s) - REQUIRED

Give a brief description of what this order will be used for

Check

Benefit to the Student Body - REQUIRED

#### How will this help students?

Only those individuals or positions on the A&SF Business Office's authorized signature list may sign below, and only those Student Organizations registered with the Office of Student Involvement that have received an SGA-approved allocation or bill may request funds for purchases. All purchase requests need be made at least TEN (10) BUSINESS DAYS prior to the time that items and/or services are required. Please take into consideration required production/ shipping times of the vendor. All purchse requests must follow all guidelines set forth by the Student Government Finance Code and the A&SF Business Office's

Financial Training. All authorized signatories must have successfully completed the A&SF Business Office's Financial Training. By signing below, you are certifying that you understand these rules and will abide by them.

ONLY
Srikar, Phil
or Cole may
sign off on
these

justification

and benefit

must be

given

 $\rightarrow$ 

IDT BY: Other ASF Dept Name Dept # Acct #							
P.O. 🔲	P-Card	P-Cardholder Name					
Authorized Signature (1)	Date	Authorized Signature (2)	Date	ASFBO Accountant Signature	Date	ASF	ВО
						Requis	ition
						Appro	ver
Print Name		Print Name		Requisition#		Initials	Date
Srikar Reddy		Philip Wessles	;				

Revised 7/17

# Sample to submit

#### TAX EXEMPT

Name:

ucf college of medicine Jeremy

Tran

Address: Ucf College Of Medicine

6850 Lake Nona Blvd Orlando FL 32827

Phone#: (407) 266-1000

Sector': SW8

Order #: 0001

Phone /Delivery

Delivery Remarks: 904-2530691

Heather

01/27/2017

11:15 AM

Dut Time:

11:32 AM

56.00

4 <14> 14" Original +4 Garlic Sauce Cup

+4 Pepperoncini Pepper 4 <14> 14" Original

56.00

+4 Pepperancini Pepper +4 Garlio Sauce Cup

+Pepperoni 1 2Ltr Pepsi

3.00 3 00

1 2Ltr Diet Pepsi 3 00 1 2Ltr Mist TWST 3 00 1 2Ltr Dr Pepper

0 00 30 Plates 0 00 30 Napkins 0.00 30 Сцрs

Subtotal:

Delivery Fee

127.00 64.00

3:00

Discount: Food Tax: 0.00 0.00 Beverage Tax:

Total Tax:

0.00 \_\_\_\_\_\_

63.00 Total: sixty three dollars and 00/100 cents

Any delivery fee charged is not a tip for the Driver. Please reward your driver with a tip for outstanding service.

#### Receipt to submit afterwards

Thank You For Choosing Papa Johns Restaurant # 3447 10721 Narcoossee Rd Orlando FL 30010 (407) 658-9191

Name:

ucf college of medicine Jeremy

Tran

Addr ess

Ucf College Of Medicine

6850 Lake Nona Blvd Orlando FL 32827

Order #: 0001

Phone /Delivery

11:15 AM

Hea ther Out Time 01/27/2017

11:32 AM

Card Type: Visa Account #: xxxx7214 Authorization #: 000436 Reference #: 419338

Batch ID:

63.00 Subtotal: 0,00 Tax:

> 63.00 Total: 63.00 Visa:

00

Additional Tender Amt:

0.00

Any delivery fee charged is not a tip for the driver. Please reward your Driver with a tip for outstanding service.

Customer Signature

Customer Copy

a tip Any delivery fee cha is your for the Driver, Pl re out ding driver with a tip service.

> Better Ingradients Better Pizza

# Olay 16th • 5-7pm AN ALL CLASS EVENT Friendly Competition and Celebration of Completion of Another Year of Medical School

**GAMES** 

**OPERATION** 

**TUG-O-WAR** 

**3-LEGGED RACE** 

**POPCORN** & SNO CONES

GIANT **OBSTACL** COURSE

# Medical Medica

Sponsored by







Your organization's name MUST be on this form somewhere  $\rightarrow$ 

	<b>Activity and Service</b>	Fee
UCF	Business Office	

#### **Purchase Request Form**

Fiscal Year 2017 - 2018 L

Must	be this year's
	PRF
	<b>←</b>



have the date submitted it to sey, or Srikar.

on this form							N N	Nust have the date	
somewhere	Organization Na	ame	Allocation # or Budget Line		Today's Date		ou submitted it to		
<b>→</b>	Add group	name		955		MUST HAVE DA	TE SUBMITT	Casey, or Srikar.	
	nitiator (print)		Phone	Advisor Nar	ne (print)	Date of Event (if ap		<del>(</del>	
	Soraya Sn	Soraya Smith 407-266-1355			Smith Smith	MUST HAVI	E	/lust have the date	
	E-Mail Address			Advisor Sign	nature	Event Location (if a	pplicable)	of the event	
	Soraya.Sr	mith@ucf.edu				UCF COM		T	
						(A&SF Business	s Office Use Only)	1	
	Recomi	mended Vendor AMAZON		Contact		2			
		Address							
		City/State/Zip Orlando		Phone					
		Email				†			
	liano il		da and leasant day and all an	0	H-MD-I	-	× × × × × × × × × × × × × × × × × × ×	4	
	Item#		otes and/or any documentation	Quantity	Unit Price		otal	4	
	1		storage cart	1	11.75			Must list each item	
	2	Pape	r gift tags	1	5.49	\$ 5	5.49 in	dividually as it is in	
	3	R	bbon	1	5.99	\$ 5	5.99 t	he shopping cart -	
4 2 gallo			on zip bag	1	18.99	\$ 1	8.99	em name, quantity	
								and price	
	Vandor Paymo	nt Options: Credit Card [	Check		Consul Total	¢ 1	2.22	<del></del>	
A justification			_ Check		Grand Total	Ψ4	2.22		
and benefit	Commence of the Commence of th	se of item(s) - REQUIRED							
must be given			hat this order will be ι	ised for		/8		4	
<b>→</b>	A STATE OF THE STA	udent Body - REQUIRED							
		this help students?						4	
	with the Office	viduals or positions on the All of Student Involvement that	SSF Business Office's authorized shave received an SGA-approved a	signature list Ilocation or	may sign below, and only t hill may request funds for n	hose Student Organ	se requests need to		
			prior to the time that items an						
	shipping times	of the vendor. All purchse req	uests must follow all guidelines se	t forth by th	e Student Government Finar	ice Code and the A&	SF Business Office	s	
			must have successfully comple	ted the A&S	SF Business Office's Financi	al Training. By sign	ing below, you are	е	
	certifying that you understand these rules and will abide by them.								
	IDT BY: Other ASF Dept Name Dept # Acct #								
ONLY Srikar,	T								
Phil or Cole	P.O. [		P-Cardholder Name						
may sign off on	Authorized Sign	ature (1) Date	Authorized Signature (2)	Date	ASFBO Accountant Signatu	re Date	ASFBO	4	
these							Requisition Approver		
<b>□</b>	Print Name		Print Name		Requisition#		Initials Date	7	
	Srikar R	eddy	Philip Wessles						

All -Try Prime Browsing History ~ get a \$50 Your order qualifies for FREE Shipping Amazon.com Gift Current Total: \$ 42.22 Card instantly upon Savings: \$ 50.00 Apply new Cost After Savings: approval for the \$ 0.00 Savings Remaining: \$ 7.78 **Amazon Rewards** Visa Card **Shopping Cart** Price Quantity IRIS 4-Drawer Storage Cart with \$11.75 Organizer Top, Gray by IRIS USA, Inc. In Stock Eligible for FREE Shipping This is a gift Learn more Shipping to: Delete Save for later Items (4) UEETEK 100pcs Kraft Paper Gift Tags \$5.49 **Christmas Tree Tags Present Gift** Labels with 10M Hemp Rope ,Red by UEETEK In Stock Eligible for FREE Shipping Gift options not available. Learn more Delete Save for later Curling Ribbon - 5mm wide - Gold -100 yards by Darice In Stock Gift options not available, Learn more Delete Save for later Ri Pac 2 Gallon Slide Zipper Freezer \$18.99 Bags - 100 Count - Food Storage by Ri Pac in Stock Eligible for FREE Shipping

Choose this option at checkout, See details

#### Subtotal (4 items): \$42.22

This order contains a gift

Proceed to checkout

Sign in to turn on 1-Click ordering.

Estimate your shipping and tax

Order summary

\$42.22 Estimated shipping & handling FREE Total before tax \$42.22

Estimated tax to be collected \$1.99

Estimated order total \$44.21

Frequently bought with Plagsearch Advanced Disclosing Chew Tablets - Pack Of 20 Tablets

Zacr Kids Toothbrush...

\$1.29

Add to Cart

Plak Smacker Plaque...

\$7.00

Add to Cart

Zacr Kids Toothbrush...

\$1.70

Add to Cart

# \$11.45

GUM Red-Cote...

Add to Cart

Saved for later (2 items)



Dynarex Tongue Depressor Senior, Sterile, 6 Inches, 100 Count by Dynarex

In stock. Usually ships within 2 to 3 days.

Gift options not available. Learn more

Delete Save for later

Shipped from: Treasure Zone

Move to Cart Move to Wish List

\$5.94

\$5.66

Subtotal (4 items): \$42.22

# Completing a PRF cont...

- Do not sign the form or have anyone from your group sign the form
- For any event involving food, must include a flyer with SGA logo
- Financial Training available for all students -

https://osi.ucf.edu/blog/rso-info/asf-financial-training/



### **Important Points**

- Do NOT purchase items with your own money. Main campus will NOT reimburse you!
- Businesses/individuals not already approved by UCF main campus as vendors must fill out and turn in an UPDATED W-9 before receiving funds
  - This can take up to 8 weeks to process; be aware of that for your events
- Cannot sign a contract as representing UCF



# **Commonly Used Vendors**

#### **Dining**

- Publix (ONLY the Cornerstone at Lake Hart location) – must submit invoice from Apron's Event Planning
- Papa John's, Domino's, Pizza Hut (call for discount!) – make sure to add tip on your PRF
- Chick-Fil-A
- Check out the new COM Cafe

#### **ITEMS**

- Amazon NO PRIME!!!
- Dollar Tree
- Oriental Trading
- Staples
- Walmart



# Commonly Used Vendors cont...

 When ordering pizza you <u>MUST</u> get a receipt at either pick up or from the delivery person and bring it to either Casey or Soraya the day of.

 When ordering pizza or food for delivery make sure you give the person's name who will be picking up the order and group name for the order.



# **Speaker Funding**

- What can speaker funds be used for?
  - Honorarium
  - Travel Expenses
  - Hotel
  - Meals
  - Transportation
- BUT you do not specify this on the PRF!
- Submit a "speaker fee" PRF with invoice
- Cannot provide a speaker fee to UCF faculty or staff

