

### OfficeMax On-line Ordering System

## ACCESS REQUEST

#### **Request for Access**

Applicant Name \_\_\_\_\_

Applicant Job Title \_\_\_\_\_

Applicant Department \_\_\_\_\_

Applicant Phone \_\_\_\_\_

Applicant E-mail Address \_\_\_\_\_

Department FAX Number \_\_\_\_\_

Department Delivery Address \_\_\_\_\_

Applicable LVPA #'s \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

#### **Authorization**

I am a Department Head/MSO, and I am authorizing Central Stores to set up this user as an approved on-line order placer with OfficeMax for the LVPA number(s) listed above.

Name of Department Head/MSO \_\_\_\_\_

Job Title of Department Head/MSO \_\_\_\_\_

Extension \_\_\_\_\_

E-mail address \_\_\_\_\_

I certify that a person with signature authorization will approve all orders, and that our department will keep a record of each electronically transmitted order for two years (five years from final ending date for orders charged to federal funds).

The duties of the individual(s) authorized to make purchases will be separated to ensure that the items ordered were received and that the purchases are appropriate. Individuals other than the person placing the order will:

1. Certify that the items ordered were received.
2. Perform an administrative review periodically of selected purchase documents to verify that the expenditures are supported.
3. Reconcile the department ledger.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date