Complete this form and send it to Anup Kapur to authorize a new user to order office supplies from Staples.

**Date:**

|  |  |
| --- | --- |
| Users Name |  |
| User E-mail Address |  |
| Department Name |  |
| Ship to address(Bldg. & Room #) |  |
| Phone # |  |
| Fax # |  |

Chartfields:

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Fund | Description | Class | DeptID | Program | Prj/Grt | Acct # |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |

**Supervisor Name and Signature**