



Kuali Financial System

KFS6 – Purchase Order Print Enhancement

The KFS6 printed PO now displays the Requestor’s contact information, including name, phone number and email address, on the output document. Requestor information is housed in the Requisition’s Additional Institutional Info tab and defaults to the Initiator’s data. However, if desired, it can be changed by the REQ Initiator or Content Reviewer (if assigned) via the look up tool. Upon generation of the PO, the information can be changed by the applicable Organizational Purchasing Officer(s), Risk Manager and Central Procurement Approvers.

Requisition | Doc Nbr: 2395560 | Status: SAVED | Created: 03:06 PM 12/05/2017

Logged in User: e.jorgen | Impersonating User: rangene

Document Overview

Delivery

Final Delivery

* Delivery Campus: MA - Manoa	* Delivery To: Nakanura, Rangene
Building: BUSINESS ADMINISTRATION	Phone Number: 808-956-8485
* Address 1: 2404 MAILE WAY	Email: rangene@hawaii.edu
Address 2:	Date Required:
* Room: C201	Date Required Reason:
* City: HONOLULU	Delivery Instructions:
State: HI	
Postal Code: 96822	
* Country: UNITED STATES	

Vendor

Items

Capital Asset

Payment Info

Additional Institutional Info

Additional

* Method of PO Transmission: PRINT	* Requestor Name: Mlkawa, Laura
* Cost Source: ESTIMATE	* Requestor Phone: 808-956-6901
Contact Name:	* Requestor Email: mlkawa@hawaii.edu
Contact Phone:	Reference 1:
Contact Email:	Reference 2:
PO Total Cannot Exceed:	Reference 3:

Purchase Order | Doc Nbr: 2395573 | Status: ENROUTE | Created: 03:32 PM 12/05/2017

Initiator: Mloay | Purchase Order #: 151949 | Purchase Order Doc Status: Awaiting Org Purchasing Office Approval

NOTE: Do not disclose purchase order numbers to vendors unless the status of the order is Open or Closed.

Document Overview

Delivery

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State: HI	
Postal Code: 96822	
* Country: UNITED STATES	

Vendor

Justification

Items

Capital Asset

Payment Info

Additional Institutional Info

Additional


* Method of PO Transmission: PRINT	* Requestor Name: Young, Colten
* Cost Source: ESTIMATE	* Requestor Phone: 808-956-3183
Contact Name:	* Requestor Email: cyoung@hawaii.edu
Contact Phone:	Sensitive Data
Contact Email:	
PO Total Cannot Exceed:	



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When the output PO or POA is generated, Requestor information will be displayed below the Items section.

		University of Hawaii PURCHASE ORDER		PO Number: 151949	
		Vendor AM MANAGEMENT ASSN PO BOX 785161 PHILADELPHIA, PA 19178-1561		Shipping Address Nakamura, Raegene BUSINESS ADMINISTRATION Room #C301 2404 MAILE WAY HONOLULU, HI 96822 UNITED STATES	
Shipping Terms Delivery Required By			Payment Terms		
Order Date 12-05-2017		Customer #		Billing Address SHIDLER COLLEGE OF BUSINESS 2404 MAILE WAY, BUSAD D304 HONOLULU, HI 96822	
Delivery Instructions		Contract ID			
Vendor Note(s)					
Item No.	Quantity	UOM	Description	Unit Cost	Extended Cost
1			American Management Assn - Annual Membership Dues	500.0000	\$500.00
Total order amount:					\$500.00
For more information contact: Young, Colleen 808-956-3183 cyoung@hawaii.edu					
_____ UNIVERSITY PURCHASING OFFICER					
<p>1 Time is of the essence and this order is contingent upon your acceptance of the specified terms and conditions and your ability to meet the above stated delivery date; otherwise this purchase order is void. Delivery address, purchase order number, and requestor's name must appear on all packages, invoices, and shipping notices.</p> <p>2 This order is subject to the Terms and Conditions on the reverse side. Terms and Conditions may also be accessed at our website: http://www.hawaii.edu/opr/docs/PO_TandC.pdf</p> <p>3 Federal funds apply? YES NO If yes, the attached federal provisions shall also apply.</p> <p>4 All transportation charges must be prepaid to O.B destination.</p> <p>5 To ensure prompt payment, invoices must cite the UH purchase order number and match item details.</p> <p>6 BY SIGNING THIS PURCHASE ORDER, PURCHASING OFFICER AUTHORIZES ISSUANCE OF THIS ORDER AND CERTIFIES THAT THIS PURCHASE IS IN ACCORDANCE WITH APPLICABLE LAW AND UNIVERSITY POLICY.</p>					
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