PPE EQUIPMENT & SUPPLIES ORDER FORM

DATE:		
Department:		
Department Contact:	Phone:	
FOAP to direct charge the purchase:		
*Per the guidance issued by HR, Individuals are	e expected to provide their own face c	overings that
meet or exceed CDC guidelines.*		
ITEMS	Unit of Measure	QTY Needed
GLOVES: 100 in a box	One of Wedsure	QTTTCCCCC
Nitrile Size S	BOX	
Nitrile Size M	BOX	
Nitrile Size L	BOX	
Nitrile Size XL	BOX	
With Size AL	<u>50X</u>	
MASKS: Please note masks are limited to five (5	5) boxes of disposable masks per depart	ment for visitor
and employees that may have forgotten their n		
Surgical Masks- Disposable- 50 in a box	BOX	
N95 Masks- 20 in a box	BOX	
	<u></u>	
HAND SANITIZER		
Hand Sanitizer 10oz- COVID-19 EPA Approved	<u>EACH</u>	
Gel Hand Sanitizer- Gallon	EACH	
	<u></u>	
DISINFECTANTS		
Spray- COVID-19 EPA Approved Aerosol 15.5oz	EACH	
Spray- COVID-19 EPA Approved Trigger 32oz	EACH	
Wipes- Purrell Hand Sanitizing-		
COVID-19 EPA Approved-40 Count	EACH	
Wipes- Clorox HP-	<u>= 151.</u>	
COVID-19 EPA Approved- 155 Count	EACH	
Wipes- Cavi- (Please wear gloves when using)-	<u>Li Kiri</u>	
COVID-19 EPA Approved- 65 Count	EACH	
Bleach- Gallons	EACH	
Bicach Gallons	<u>L/CH</u>	
Sneeze Guards: At the discretion of PBS, the Univ	versity will allow departmental purchas	es of sneeze
guards for areas which have a large amount of fa		
Sneeze guards for individual work spaces cannot		
guard, please list the quantity and the justification		
based on size requirements. To that end, if the re		
ability to make the purchase of the sneeze guard		<u> </u>
SNEEZE GUARDS	EACH	
	<u></u>	
Installation Needed	Yes No	
instantation receded		
Justification for ordering		
Jastinion of Gracinia		