

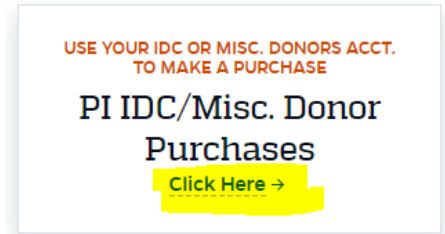
# HSRMP Purchase Requests: PI IDC/Misc. Donor Purchases

1. Click the 'Click Here' Button to open the [PHHP Research Administration Core - Request to Purchase/Payment](#)

2. You will be taken to a 'New Purchase Form' upon following the link

(Log in to the portal with your Gatorlink information if you are not automatically logged in)

3. Fill out the form with the required information



## Notes:

- **Department** = HSRMP
- **Principal Investigator** = Find your name
- **Project Number** = Put the Project Number or Account Name
  - **Example:** Dr. \_\_\_\_ IDC or Misc. Donors
- **Vendor** = Input Vendor Name
  - **Example:** AcademyHealth
- **Purpose of Product/Service** = Description of purchase
- **Benefit to Project** = Purchase' significance to research
  - \*\*\*Please Note: Purchases with research limited purposes must be split with Department Funds\*\*\*
- **100% IDC Purchase/Payment Certification Statement**
  - **Example:** Purchase will be used only for research
  - If not, leave blank

A screenshot of a web form titled "PHHP Research Administration Core - Request to Purchase/Payment". The form has a navigation bar with "Home", "New Purchase", "View/Approve", and "Logout (hsci25/guest)". Below the navigation bar are two radio buttons: "I am the PI" (unselected) and "I am ordering on behalf of a PI" (selected). The "PI Details" section includes a "Department" dropdown menu (set to "Select"), a "Principal Investigator" dropdown menu, a "Project Number" text input, a "Vendor" text input, a "Purpose of product/service" text area, and a "Benefit to Project" text area. At the bottom, there is a "100% IDC Purchase/Payment Certification Statement (i.e. purchase will be used only for research)" text input.

4. Fill in the Department's Address Information

## Notes:

### Department Physical Address:

**1225 Center Drive HPNP 3<sup>rd</sup> Floor Rm. 3101  
Gainesville, FL 32610**

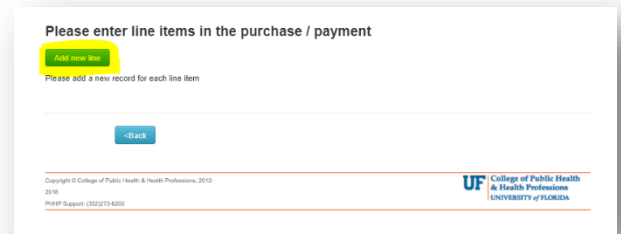
### Department PO Box: (if you choose to send it to Dept. Mailbox)

**PO Box 100195  
Gainesville, FL 32610**

**\*\*\*Individual responsible for retrieving packing slips and returning them to the core = PI or HSRMP Admin Asst.\*\*\***

A form with a white background. At the top, it asks "Packages are delivered to the Research Core. Do you need an alternate delivery address?". Below this is a text input field for "Exact delivery address (include building and room)". At the bottom, there is another text input field for "Individual responsible for retrieving packing slip and returning them to the core".

- On the next page, click **'Add New Line'** to enter line items for purchase.



[Return](#)

### Add new line item

Project  
  
 (Enter project # if you want to split payment)

Quantity

Item/Invoice Number

Item/Invoice Description  
  
 Should contain model, part, or version number(s) to identify the items

Unit Price

[Next](#)

- Fill in the boxes with the required information.

**Notes:**

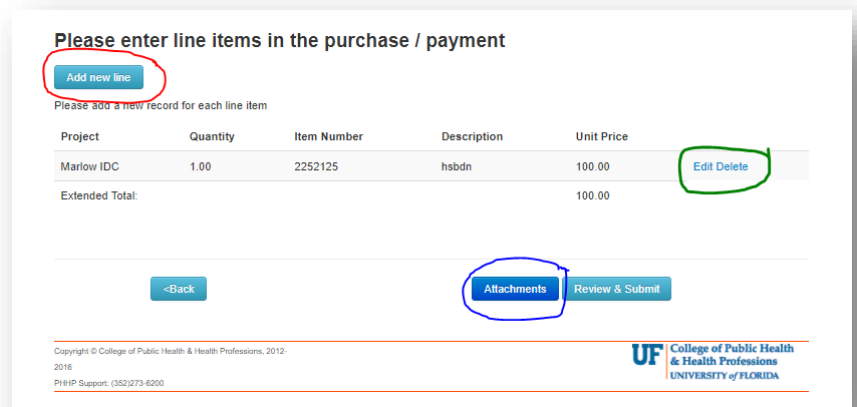
**Project Number** = Put the Project Number or Account Name

- Quantity** = # of Items
- Item/Invoice Number** = Invoice Number on Document
- Item/Invoice Description** = Detailed Item Description
- Unit Price** = Item Price

Click **'Next'** to submit the line item

- Click the following boxes to continue the request.

- Add New Line:** Add multiple line items for purchases to the same vendor
- Edit/Delete:** Edit or Delete the line items
  - \*\*\*Please be aware that these are two separate buttons\*\*\*
- Attachments [IMPORTANT]:** Please add an invoice, receipt, or supporting documentation for the purchase



8. Upload an attachment to the request.

[Invoice, Receipt, Supporting Documentation]

Steps:

1. Type a Brief Description of the Document
2. Click **'Choose File'** to select a file from your folders
3. Click **'Upload'** to upload the file
4. Click **'Next'** when you are finished uploading all the files

Please attach required documents supporting your purchase request. Note that you can attach multiple files if required. Hit the 'Upload' button after selecting a file. Hit the 'Next' button when all uploads are complete.

Brief Description of document

1

2 Attach file:

3  No file chosen

4

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9. Click **'Review and Submit'** when you are done entering line items and uploading attachments

Please enter line items in the purchase / payment

Please add a new record for each line item

Project	Quantity	Item Number	Description	Unit Price	
Marlow IDC	1.00	2252125	hsbdn	100.00	<a href="#">Edit Delete</a>
Extended Total:				100.00	

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10. Please review carefully and make sure all information is entered correctly. Press **'Submit'** to process your purchase request with the PHHP Research Core.

Please review and hit the 'Submit' button below to submit your request for processing:

**Purchase/Payment Information**

Purchase ID	9646	Vendor	Amazon
Dept Code	HSRMP		
Submitted By	Jackson, Lance		
Date Submitted	2022-01-19		
PI/Faculty Name	Jacobs Molly		
Project Number	Jacobs IDC		
100% IDC Purchase/Payment Certification Statement	125511		
Alternate Delivery Address	fbsd		
Person Responsible for Packing Slips	fs		
Grants Core Comments			

**Purpose of product/service**

jg

**Benefit to project**

kgkk

**Line items**

Quantity	Item/Invoice Number	Description	Unit Price
1.00	2252125	hsbdn	100.00
Extended Total:			100.00

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11. You will receive an email from the PPHP Research Core Team giving you the status of your Purchase Request.

Purchase Request - HOLD

do\_not\_reply@phpp.ufl.edu <"Research Administrator"@v [redacted]> 12/17/2021

The following purchase request was acted upon:

**Purchase/Payment Information**

Purchase ID	9476
Dept Code	HSRMP
Submitted By	[redacted]
Date Submitted	2021-12-14
PI/Faculty Name	[redacted]
Project Number	00127569
100% IDC Purchase/Payment Certification Statement	Purchase will be used only for research
Alternate Delivery Address	
Person Responsible for Packing Slips	
Grants Core Comments	12/14, 12/17: log in?
Vendor	University of Florida Graduate School

Purchase Request - PROCESSED

do\_not\_reply@phpp.ufl.edu <"Research Administrator"@v [redacted]> 12/17/2021

The following purchase request was acted upon:

**Purchase/Payment Information**

Purchase ID	9476
Dept Code	HSRMP
Submitted By	[redacted]
Date Submitted	2021-12-14
PI/Faculty Name	[redacted]
Project Number	00127569
100% IDC Purchase/Payment Certification Statement	Purchase will be used only for research
Alternate Delivery Address	
Person Responsible for Packing Slips	
Grants Core Comments	[redacted] purchased w his pcard. will submit receipt under pcard tab
Vendor	University of Florida Graduate School

12. The Fiscal Administrator for the Grants Team will reach out to you to assist with the payment or inquire further information regarding your Purchase Request.

*If you have any questions or need further assistance, please contact your Department Administrator.*