

Purchase Request Form

- All purchase request forms must be filled out and **emailed to**: <u>reimbursements@lifeworks.org</u>. Please CC your Service Coordinator on the email so they are aware of your request as well.
- You will receive an auto-reply email confirming receipt of your request.
- All items to purchase must equal \$100 or more PER VENDOR.
- > Lifeworks is unable to make purchases from vendors outside of the United States.
- Lifeworks only uses GUEST CHECKOUT and is not able to create accounts. If guest checkout is not an option, Lifeworks will not be able to purchase from that vendor.
- All items must be available for shipping as Lifeworks is unable to offer store pick up.
- Please note that Lifeworks **DOES NOT** have Amazon Prime.
- Once Lifeworks has received an accurate and complete request, Lifeworks has 7 days to complete the purchase(s). Please be mindful of your budget's service end date, and that prices are subject to change.
- Lifeworks will not go into your CSP/CSSP to complete a purchase on your behalf, you must request it.

In order to process your request, you must confirm each of the following statements by checking each box below.

There are enough funds in the budget to process this request, including tax and shipping.							
☐ These items are approved in the current plan.							
☐ The form is signed and dated by the Support Manager.							
The required documentation has been provided to complete this request, including a link to the item(s).							
There is only one requested item PER LINE and only one vendor PER REQUEST.							
Instructions: Complete <u>all</u> requested information. If any form for additional information and your purchase will nand dated. Please type in the required fields below.	y information is missing or incomplete, we will return the ot be completed. Purchasing form MUST be signed						
PARTICIPANT INFORMATION	SHIPPING INFORMATION						
PARTICIPANT NAME:	NAME:						
SUPPORT MANAGER NAME:	STREET ADDRESS:						
SUPPORT MANAGER EMAIL: CITY, STATE, ZIP:							
LIFEWORKS SERVICE COORDINATOR:							
SUPPORT MANAGER SIGNATURE (REQUIRED):	DATE: (MM/DD/YYYY)						
1 30PPORT MANAGER SIGNATURE (REQUIRED).	57(12) (IIIII/195/1111)						
SOFFORT WANAGER SIGNATURE (REQUIRED).							

PLEASE LIST THE ITEM(S) YOU ARE WANTING PURCHASED ON THE FOLLOWING PAGE:

LIFEWORKS.ORG

6636 Cedar Ave S. Suite 250, Richfield, MN 55423 | 866-454-2732

Lifeworks Services, Inc. is a 501(c)(3) private, nonprofit organization and an equal opportunity employer. This information can be provided in an alternative format upon request.



VENDOR:

	PRODUCT NAME	Budget Task	QTY	SIZE	COLOR	OTHER INFO	UNIT PRICE			
EX:	Sensory Swing	sensory	1	110" swing	blue	n/a	\$99.99			
	LINK TO REQUESTED ITEM: www.amazon.com/dp/B07Z79ZCZX?ref=ppx yo2ov dt b fed asin title&th=1									

	DDODUCT NAME	Budget Teek	OTV	0175	COLOR	OTHER INFO	UNIT		
	PRODUCT NAME	Budget Task	QTY	SIZE	COLOR	OTHER INFO	PRICE		
1									
	LINK TO REQUESTED ITEM:								
2									
_									
	LINK TO REQUESTED ITEM:								
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