

Internal Service Delivery Order Form

* designates a required field **PRICE** *STAFF NAME: **ITEMS PURCHASED** *DEPARTMENT: *Worktags: By checking this box and signing below, I agree to purchase the items at the prices specified on this form. I allow the Surplus Store to charge my department for these items via an Internal Service Delivery in Workday. I acknowledge that is it my responsibility to approve the ISD initiated by the Surplus Store in a timely manner. *SIGNATURE *DATE Thank you for shopping at the GVSU Surplus Store! Make sure to visit our online store at www.gvsusurplusstore.com and follow us on social media. TOTAL: GVSU Surplus Store gvsusurplus GVSUsurplus