STUDENT TECHNOLOGY FEE REQUEST FORM

Procedure for Submission: Form Updated: 9/05/17

- 1. Submitter must obtain required information from vendor(s). An official quote from the vendor must be attached. No website screen shots
- 2. This request must be reviewed, approved, and submitted by the requesting program's School Chair.

3. The School Chair may email this request to the Tech Fee Director. Since some schools will have multiple requests, please rename request PDF files in the following format: Schoolname# (rank, 1 being the highest priority) example - SocialJustice1, SocialJustice2, etc. Please submit as one PDF file

Dept. making red	quest:		Requesting Faculty:				Date Submi	tted:	
IMI	PORTANT	: Attach an o	fficial quote from t	he ver	ndor.				
List one item OR group (for use as a "package") per page.									
Item Name		Vendor info. (name, address, Web site URL phone #, email, etc.)			Part or Model #		Cost (each)		Total
Course(s) where					Expected life o		# Stu		
item(s) will be used					product (years		Impacted	per Year	
Location equipment o					ch Fee needed for a nance? What is the		or		
Software will be used/stored maintenance? What is the annual cost? Provide a brief description of the technology requested*:									
		,							
Briefly describe how t	he technolo	nav will he used (fu	ınction)*:						
Briefly describe flow t		ogy will be used (it	induction, .						
Provide a rationale that Tech Fee funds are appropriate for this request*:									
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*Keep in mind that the committee members come from a variety of educational backgrounds and may not be familiar with department specific language. Please use concise, common terminology so that committee members reviewing this form will be able to fully understand the request.

• If you are submitting a request for computers, printers, scanners or software, you <u>must</u> consult with College Computing and the technology staff, to acquire a quote and to make sure that this equipment/software is supported by UT and compatible with existing technology.



422 ALEXANDERSVILLE RD MIAMISBURG, OH 45342-3658 PH 937-824-4400 FX 937-824-4444

BILL TO

1000403 UNIV OF TOLEDO HEALTH AND SCIENCE CAMPUS DEPT OF PUBLIC HEALTH 3015 ARLINGTON AVE TOLEDO, OH 43614-2570

Quotation

•	S aotation
QUOTE #	01020435
LOCATION	01
DATE	03/02/18
PAGE	1 OF 1

SHIP TO

UNIVERSITY OF TOLEDO DEPT OF PUBLIC HEALTH MS 1027 3000 ARLINGTON AVE TOLEDO, OH 43614-2595

QUOTE DATE 03/02/18	EXPIRE DATE 04/01/18	REQUIRED DATE	REFERENCE NUMBER SOUNDPRO	PAYMENT TERMS NET 30 DAYS		
PREPARED BY WILMA INMA	· \N PH 937-824	-4400	CONTACT MICHAEL.VALIGOSKY	SHIP VIA UPS GROUND		
FREIGHT TERMS PREPAY & A	DD		FOB	SALES PERSON OHIO HOUSE		
PRODUCT/DESCRIPTION QUANTITY PRICE U/M: EXTENSION						

QUESP-DL-2-1/3-AC3 1 5558.76 EA 5,558.76 SOUNDPRO DL 1/1 & 1/3 OCTAVE DATALOGGING RTA & CALIBRATOR 1 45.00 EA 45.00

FREIGHT ESTIMATE

Prices quoted by Argus-Hazco include our start-up services during which your people will be instructed regarding the manufacturers recommendations for the proper use, care, calibration and maintenance of the equipment being purchased. In addition, we can assist you with sales, leasing, rental, training, repair, asset management and industrial hygiene consulting services. We are on the We b at www.argus-hazco.com. You might be interested in one of our newest services "LiveTech" where you can communicate on-line and observe our technical staff provide direction and assistance.

MERCHANDISE TOTAL	TAX	FREIGHT/HANDLING	QUOTE TOTAL			
5,603.76	0.00	0.00	5,603.76			
		Accepted:				
	By:					

Date: