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 request:			Requesting Faculty:				Date Submitted:						
IMPORTANT: Attach an official quote from the vendor.													
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 of	f	# Stu	dents					
item(s) will be used	em(s) will be used				product (years)		Impacted						
Location equipment o													
software will be used/stored maintenance? What is the annual cost?													
Provide a brief description of the technology requested*:													
Briefly describe how the technology will be used (function)*:													
briefly describe now the technology will be used (function)":													
Provide a rationale that Tech Fee funds are appropriate for this request*:													
Trovide a rationale the	at 100111 00	ranas are appropr	idio for tino request .										

*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.



Ship To:

University Of Toledo 2801 West Bancroft Street MS 408 Toledo OH 43606 United States

Shipping Contact:

Bill To:

University Of Toledo 2801 W Bancroft St. Mail Stop 208 Toledo OH 43606 United States

Billing Contact:

Quote

Quote #: QT45698

Quote Date: 30-Sep-2021 Expire Date: 30-Oct-2021 Contact Name: Andrew Misko

Sales Manager: Adam Herbst adamherbst@gophersport.com

Tel: 855-500-2748 Fax: 800-451-4855

Quote Total:

\$699.00

Item availability may change hourly based on incoming orders. Please place your order quickly to ensure fast shipment of your product(s).

Item	Qty Requested	Qty Available	Est Ship Date	Unit Price	Extended Price
76-152 Polar Verity Sense Optical Heart Rate Monitor - Medium to XXLarge, Pack of 10	1	0	14- Oct-2021	\$699.00	\$699.00
				Subtotal:	\$699.00
		Processing:	\$0.00		
	d Sales Tax :	\$0.00			
			(Quote Total:	\$699.00

Order prepayment may be required. We offer 30-day terms on approved credit. Full payment terms and wire transfer information are available by request.



Unconditional 100% Satisfaction Guarantee

Your satisfaction is our #1 concern. If you are not satisfied with your purchase for any reason at any time, contact us and we will replace the product, credit your account, or refund the purchase price. No questions. No hassles. No exclusions. No kidding!

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