$\qquad$
$\qquad$ Date: $\qquad$
VIRGINIA COLLEGE BUILDING AUTHORITY EDUCATIONAL FACILITIES REVENUE BONDS, SERIES 2022A EQUIPMENT REQUISITION

2022 Acquisition Fund

State Treasurer Richmond, Virginia

Page $\qquad$ of $\qquad$
Goods or services received on or before $6 / 30 / 22$ : $\$$ $\qquad$
Goods or services received after 6/30/22: \$

On behalf of $\qquad$ (the "Institution"), this is to request the transfer of \$ $\qquad$ (total for this request) from the 2022 Acquisition Fund established by the Virginia College Building Authority ("VCBA") pursuant to the issuance of its Educational Facilities Revenue Bonds, Series 2022A. I hereby certify that this amount will be used to reimburse the Institution for the cost of equipment: (1) in accordance with the procedures established by the State Council of Higher Education; and, (2) as defined in Chapter 12, Title 23.1, Code of Virginia of 1950, as amended.

I further certify that the corresponding Cardinal vouchers have been submitted to the Department of Accounts' Cardinal system and that payment for the cost of equipment has been made. A list of this equipment is provided as Attachment $\mathbf{A}$.

I understand that the Department of the Treasury will process a Funds Receipt entry to record the reimbursement in Cardinal. Unless alternative instructions are provided, all reimbursements will be recorded to Account 255470 , Fund 03000 . These amounts will then be appropriately allocated by this Institution by Journal Voucher. Alternative instructions are restricted to a single line of Cardinal coding.

> (Signature)
(Name)
(Title)
(Do not mark below this line)

Date Received SCHEV: $\qquad$
Date Received VCBA: $\qquad$

Approval SCHEV: $\qquad$ Approval VCBA: $\qquad$

Date: / /
Date: $\qquad$

Agency Name:
Agency Code:
Grand Total of All Pages:

List of Equipment (Attachment A)

Requisition Number:
Date: / /

| Reference Number | Description | (A) ETF Funds | (B) Other Fund \$ | (A+B) Actual Purchase Price | Program Code | Discipline Code | Voucher Number | Payment Date |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
|  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |
|  | for this page | 0 | 0 | 0 |  |  |  |  |

