



LEHIGH UNIVERSITY

Sales Tax Itemization Form:

Project Name: _____
 RFP , Work
 Order, PO,
 SO, Number
 etc. _____ Quote Date: _____
 Supplier Name: _____
 Supplier contact name, phone & fax number: _____
 Lehigh contact name, phone & fax number: _____

Taxable equipment & materials - \$ _____ U.S. Dollars

Brief description of materials included in Taxable _____

Nontaxable equipment & materials - \$ _____ U.S. Dollars

Brief description of equipment and materials included as non-taxable _____

Total tax to be paid by Lehigh & collected by supplier - \$ _____ U.S. Dollars

| | |
|---------------------------------------------|-------|
| For Lehigh use only: | |
| Lehigh Purchase Order Number: | _____ |
| Copy filed with Purchase Order (circle one) | Y N |