



Purchase Request Form

1 FORM PER PRODUCT/SERVICE

Date 02/10/2025

Participant's Name [REDACTED]

UCI# [REDACTED]

Regional Center RCOC

Name of Person Completing Request [REDACTED]

Phone Number [REDACTED]

Email Address [REDACTED]

Mailing/Shipping Address of where to ship product or include in registration:

[REDACTED] 1234 Main Street, Orange County, CA 12345

PLEASE COMPLETE ALL APPLICABLE FIELDS TO PREVENT ANY DELAY IN PAYMENT OF SERVICES. WE NEED ALL INFORMATION TO MAKE THIS PURCHASE. IF WE DON'T RECEIVE ALL REQUIRED INFORMATION FOR THIS PURCHASE YOU WILL NEED TO COMPLETE ANOTHER FORM.

What are we purchasing?

iPad & Apple Pencil

How will this product/service be purchased? (i.e. web purchase, over the phone purchase, etc.)

Online

URL Link (if applicable)

https://www.apple.com/us-edu/store

Phone Number (if applicable) & Main Point of Contact

Service Code
(refer to spending plan) 333

Total Cost of Purchase \$ 3139.89

(factor in tax, shipping, and other fees for purchases)



Is this a one time purchase or a monthly purchase (ongoing monthly)?

One time

If ongoing monthly purchase please provide the timeframe (ex. 6 months, 1 year, etc.) & provide the dates.

N/A

To make this purchase do we need a username and password to access your account? Yes or No

If yes, please provide information

Login: [redacted]
Password [redacted]

Does this purchase require us to register the participant? Yes or No

If yes, please provide all necessary information required to register: (ex. Date of birth, gender, address, etc.) *Walk through this process yourself online so you know what is required.*

AppleCare using the login an password.



If this registration requires a waiver do we have your consent to acknowledge/agree on your behalf? Yes or No

Please provide any additional information needed to complete the purchase.

Personalized 13-inch iPad Pro Wifi+Cellular 2 TB and Pencil pro + Tax and Shipping + Apple Care 2 years
Will send the color, engraving and product specs via email.

Please allow up to 30 days from receipt of your request for the purchase to be made. When Arch FMS pays for services in advance which were not provided for any reason, the business will not be allowed to refund the money to Arch FMS or the participant/legal representative.

Upon submitting this request form, you agree to the terms and Arch FMS purchase request policies as stated in the participant and FMS agreement form.

Signature: _____

Date: 02/10/2025