CSU Extension
Help Desk Request

Date:

Contact Information

Employee Name:

County:

E-mail:

Phone:

Cell Phone:

Hardware

Computer Service Tag:

System Description:

Software

Application:

Version:

Account# to Charge for Software Purchase :

Describe the problem in detail:

How to contact you

- ◯ E-mail
- ◯ Phone
- ◯ Cell Phone

Shipping Information (should we need to ship to your location) NO PO Boxes please.

Address:

Account # to Charge for Shipping:

For Surplus ONLY

Computer Service Tag:

Serial Number:

Account # to Charge

Internal Use Only

Handled By	Hrs.	Date

09/03/2010