

PURCHASING CARD – INTERNAL USE

Date of purchase: _____

Requested by: _____
Print Name Requestor's signature

Business purpose (required): _____

Vendor Name: _____

AMOUNT OF PURCHASE \$ _____ Attach receipt/confirmation _____
Order placed by: _____ Date _____

Distribution of charges:

Item Description _____ Spend Category# _____
Program/Gift/Grant# _____
Additional Worktag# (Detail, Activity, etc.) _____
Account Name _____ Amount \$ _____

Item Description _____ Spend Category# _____
Program/Gift/Grant# _____
Additional Worktag# (Detail, Activity, etc.) _____
Account Name _____ Amount \$ _____

Item Description _____ Spend Category# _____
Program/Gift/Grant# _____
Additional Worktag# (Detail, Activity, etc.) _____
Account Name _____ Amount \$ _____

Authorized Account Signature Authority _____
Date

Additional Signature Approval _____
Date

Completed form by _____
Cardholder Date

*This completed form and receipt/confirmation must be submitted with the cardholder's Statement of Account by the 15th of each month for the preceding month to the Controller's Office.