PURCHASING CARD – INTERNAL USE

| Date of purchase: | | |
|---|-----------------|------|
| Requested by: | | |
| Business purpose (required): | | |
| Vendor Name: | | |
| AMOUNT OF PURCHASE \$ Order placed by: | | |
| Distribution of charges: | | |
| Item Description Program/Gift/Grant# | | |
| Additional Worktag# (Detail, Activity, etc.) Account Name | Amount \$ | |
| Item Description Program/Gift/Grant# | Spend Category# | |
| Additional Worktag# (Detail, Activity, etc.) Account Name | | |
| Item Description Program/Gift/Grant# | | |
| Additional Worktag# (Detail, Activity, etc.) Account Name | | |
| Authorized Account Signature Authority: (may use email approval in place of signature) | | Date |
| Completed form by: | | |
| | | 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.