

P-Card Purchase Authorization Form

Original Itemized Receipts Required  ONLY ONE receipt/transaction per form

Purchase Type: Food Expense Travel Expense General Supplies Personal Purchase Unauthorized/Fraud
 Participant Support
 (Grant Only)

Cardholder: _____ **Card Last 4 Digits:** _____ **Dept. Approval:** _____

Vendor Name/Contact: _____ **Purchase Date:** _____ **Receipt Total: \$** _____

Item Description <small>(Group by object code & site)</small>	Amount	Tax	Account	SubAcct	ObjCode
Does this purchase contain any one item valued at \$5,000 or more after tax and shipping fees? Yes	SubTotal				
	Sales Tax				
	Shipping/Handling				
	Grand Total				

Reconciler Signature _____ Date _____

Liaison Signature _____ Date _____