

CREDIT CARD PURCHASE AUTHORIZATION FORM

Last 4 digits o	of credit card:	Purchase	Amount not to	Exceed:		
Ref. #	Food Form	Event Date	Time – Out	Time - In	Tax (YES/NO)	
					[] YES
	FF				[] NO
Date of this r	request (mm/dd/yyyy):					
Requester's	name (type):					
Department	name (type):					
	umber: (Acct-Fund- Appr-ProjectID)					
Vender name	e (type):					
Budget admi	n. Name (type):					
Approval Sig	nature:		Date: _			
Brief description of items to be purchased with this authorization.						
SMALL & ATTRA	CEIPTS ARE TO BE TURNE ACTIVE ASSETS <u>MUST</u> BE F IANDLE BY IT DEPT. THES	PURCHASED ON A PUP	RCHASE	Office Use Only		
DIGITA	AL CAMERAS, ABLE VIDEO PROJECTORS		DVC			
PORT/ PERS(ABLE COMPUTER EQUIPME ONAL DIGITAL ASSISTANTS	NT SUCH AS LAPTOP	S AND DIGITAI	A 10		
RECO	RDER.		•	-		