Transaction ID #

UNIVERSITY OF ARIZONA
PURCHASING CARD LOG/USE FORM

Card Holder:_____

Deliver to:_____

Purchase Date:_____

Dept. Name:_____

TA# (if travel related)_____

Vendor: _____

Contact Name: _____

Phone Number:_____

Website: _____

State:_____ Zip Code:_____

Item Description	Amount	FRS acct	Obj Code
***AZ State Sales Tax #**			
Sales Tax			
Freight			
Total Amount	$0.00		

Order Place By: Phone ☐ Fax ☐ Mail ☐ Web ☐ Vendor Location ☐ Other ☐

Transaction Type: ☐ Commodity ☐ Service

Please check if any of the below apply

- ☐ Person purchased for is a US citizen (if person purchasing for is NOT a US citizen ***do not use pcard***)
- ☐ Person purchased for is a UA employee or student
- ☐ This is a transaction in foreign currency (conversion rates will need to be calculated & documented)

State purpose for purchase (identify program/project)

Purchaser:_____signature_____

Reconciled:_____signature_____

Approved:_____signature_____

THE UNIVERSITY OF ARIZONA
Mel and Enid Zuckerman College of Public Health

Purchase Not Allowed on the Pcard

****Partial List****

- **PURCHASES OVER $5000.00**
- **Alcohol, Animals, Ebay, Firearms/Ammunition, Foreign Visitors, Gift/Donations,**
- **Hazardous Materials, Hotels, Medical Services and Pre Paid Cards.**