



AUGUSTA UNIVERSITY

FACILITIES P-CARD PURCHASE AUTHORIZATION FORM

REQUIRED INFORMATION	RESPONSE
a) Date	
b) Complete Department Name	
c) Vendor Name	
d) Cardholder Name	
<i>I certify that I have made the listed transactions on behalf of the Facilities Department at Augusta University and they comply with the established procedures for using the purchasing card.</i>	
e) Cardholder Signature/Date	

DEPARTMENT APPROVAL INFORMATION (APPROVER 1):	
REQUIRED INFORMATION	RESPONSE
a) Approver Name	
<i>I certify that I have reviewed the listed transaction, and all comply with the State and Augusta University purchasing regulations.</i>	
b) Approver Signature/Date	

DEPARTMENT APPROVAL INFORMATION (APPROVER 2):	
REQUIRED INFORMATION	RESPONSE
a) Budget Managers/Supervisor - Name	
<i>I certify that I have reviewed the listed transaction, and all comply with the State and Augusta University purchasing regulations.</i>	
b) Budget Managers/Supervisor - Signature/Date	

ITEMS ORDERED	VENDOR	QTY	TOTAL COST

Attach to the receipt and keep with statement packet. Blanket approvals keep in file.

Justification/Comments:

Note: Although the original funding source associated with the funds utilized for this purchase may have been provided by one of the College/University's foundations through a grant, gift, etc., the expenditure is being made with institutional funds for institutional purposes.