Byrd Center - PCard Transaction Form

INSTRUCTIONS:
- This form is required to record transaction activity and must be completed in its entirety. Original, itemized receipts or equivalent documentation must be attached.
- Form may be used for multiple purchases for the card listed below if all are under same business purpose and chartfield. Additional sheets may be attached as needed.

SECTION I: CARD INFORMATION

Card type (check one) :  □ OSP Card  □ Department Card

Last 4 digits of card:  Name embossed on card: BYRD POLAR RES CENTER

Purchase made by:

BUSINESS PURPOSE:

Supplier:
1. Item Description:  Amount: $

2. Item Description:  Amount: $

3. Item Description:  Amount: $

4. Item Description:  Amount: $

Purchase date:  TOTAL: $

SECTION III: WORKTAGS

CC _____ Fund _____ BL _____ Grant __________________________ Program ___________________

CC _____ Fund _____ BL _____ Grant __________________________ Program ___________________

CC _____ Fund _____ BL _____ Grant __________________________ Program ___________________

CC _____ Fund _____ BL _____ Grant __________________________ Program ___________________

<table>
<thead>
<tr>
<th>CC</th>
<th>Fund</th>
<th>BL</th>
<th>Grant</th>
<th>Program</th>
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Dean / VP / Designee Signature  X  Date

SECTION V: CERTIFICATION OF TRANSACTION(S)

☐ I certify that the above purchase(s) was/were made in accordance with university Expenditure, Purchasing, and Travel policies. Failure to comply with these policies may result in revocation of card privileges, corrective action up to and including termination, and/or criminal action. The university will seek restitution for any inappropriate charges.

Purchaser's Signature  X  Date

PRE-APPROVAL ___________________ DATE __________ PCard Transaction Form - Revised 4/12/2022