Requisition Form: EE 491 / ME 452

University of Nevada, Reno

Purchasing Card Transaction Log for the week ending: / /

Card Holder Name: Purchasing Card # (last six digits)

Submit this form with associate receipts , etc. to Accounts Payable within 1 week of the end date

(If associated receipts are not presently available submit at a later date. Clearly indicate week, cardholder name, purchase card # for each receipt etc.)

Transaction Date	Merchant Name	Commodity/Material Description	Amount	Phone Order (x)	Quote Attached (x)	Receipt Attached (x)	ACCOUNT TO BE CHARGED IF OTHER THAN DEFAULT ACCOUNT				
							FUND	AREA	ORGN	OBJ	SOBJ

	CPO-01-001	
Prepared By	CPO #	Account Authorized Signer (s)

Explanation if credit card slips, cash register receipts, packing slips, etc...not attached