

Purchasing Reconciliation/Request Form

P-Card Purchase
(Attach receipts)

Purchase Order
(Attach quotes)

P-Card Holder:

Date of Purchase:

Travel Related Purchase?

(If this purchase is travel related, please provide Traveler Name, Employee ID#, and Travel Request #)

Organization / Dept Name:

Vendor Name:

Vendor Address Street:

City:

State:

Zip Code:

Name of Event:

Date of Event:

of Participants:

Itemized list of Purchase:

(Be Specific)

University Purpose

*University Purpose should include how purchase best suits University/Department Mission and Initiatives.

* If FOOD is purchased, list business purpose, # of participants, relationship to USF (staff/faculty/students/guest) and attach agenda.

Amount of Purchase:

GL Unit: USF01

Oper Unit: STP

Fund:

Init. 0000000

Dept:

Prod:

GL Acct:

Purchaser Signature:

Date:

*NOTE: I certify the purchase did not include alcohol and this expense fully supports my department and USF's mission.

Authorized Signature:

Date:

(e.g. Supervisor/Accountable Officer/Accountable Officer Designee/Req_Manager. If over \$5,000, signer must be Accountable Officer)

(!) Upload signed PRF with receipt attached to cardholder's PCard receipt folder (Box) with file name format:
(mm-dd-yy - Vendor Name - \$Amount of Purchase; ex. 03-21-22 - Amazon - \$20.22).