

department of architecture

Procurement Card Order Form

Email report date:

Approved by (if necessary):

Purchased by:

Purchase Date:

Vendor:

Location:

Description of Merchandise

Cost

Subtotal:

Sales Tax:

Shipping:

Charge the following budget (indicate split funding amounts if applicable):

Total cost:

Audio-Visual

Instruction:

Instructor's name:

Card Key Administration

Class Number:

Shop:

Central Administration

Fee Income

State Funds

Computer Labs:

Slide Library:

State Funds

Discretionary

Fee Income

State Funds

Discretionary

Other – Specify:

Grant – Specify:

Please submit this form to the Architecture Business Office, (rev. 12/05)