College of Agriculture, Food and Environment
Animal and Food Sciences

PROCARD VOUCHER

STEP 1: BASIC PURCHASE INFORMATION

Purchase Date: _____ Purchaser Name: _____

Vendor Name: _____ Cardholder Name: _____

7-digit Procard P#: P _____ Cardholder Dept: _____

Amount: _____ Cardholder Phone: _____

Item(s) Purchased:

Business Purpose:

STEP 2a: PRE-AUTHORIZATION

REQUIRED FOR PURCHASES GREATER THAN $500

PLEASE EXPLAIN ANY EMERGENCY PURCHASE MADE W/O PRE-AUTHORIZATION IN BUSINESS PURCHASE ABOVE

Supervisor (or Delegate) Signature Date

STEP 2b: APPROVAL SIGNATURES

Purchaser Signature Date

Supervisor (or Delegate) Signature Date

STEP 3: EDIT INFORMATION (FOR DEPT USE)

COLUMNS TO BE COMPLETED BY PURCHASER		COLUMNS TO BE COMPLETED BY BUSINESS OFFICE		
Account No. to be Charged	Amount ($)	G/L Acct	Internal Order No.	Assign Code/Class
TOTAL AMOUNT	0			