

## PROCARD VOUCHER & PRE-AUTHORIZATION FORM

Purchase Date:		Purchaser Name	:	
Vendor Name:		Cardholder Name:		
Amount:			:	
ms Purchased:		Business Purpose	:	
STEP 2: pre-authorization	and approv	als		
<b>REQUIRED FOR PURCHASE</b>	S > \$1,000	x		
EXPLAIN ANY EMERGENCY PURCHASES MADE W/O PRE- AUTHORIZATION IN BUSINESS PURPOSE ABOVE		Signature of Purchaser Da		Date
		x		
upervisor (or Delegate) Signature	Date	Signatura a	f Supervisor or	Delegate Date
STEP 3: EDIT INFORMATION (FOR	( DEPT USE)			Delegate Dat
		Account Number		
		Cost Center	Assignment/	l
	1	M/DC Flomont		Amount
Item		WBS Element	Internal Order	
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	55 #, et a)	WBS Element	Internal Order	

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