

Department of Teaching, Learning, and Culture
Credit Card Requisition

Date: _____

Name of Requestor: _____

Item(s) to be purchased	Purpose of Purchase	Possible Vendors

Estimated Cost: _____

Will item(s) be purchased over the internet? Yes No

Department Approval: _____

Are you purchasing airfare? Yes No
If yes, please request separate **CBA** travel card.

Source of funds: _____

Card to be Returned: *Date:* _____ *Time:* _____

Guidelines:

- **When returning the card, you must include the itemized receipt.**
- **No tax is allowed on the receipt. If tax is included, you are responsible for getting a new receipt.**
- **No travel expenses are allowed on this card.**
- **No alcohol is allowed on this card.**

I have read the above guidelines and agree to follow them when using this card.

Signature of Requestor: _____

ProCard Account: _____