



Credit Card Authorization Form

Person requesting use of card: _____

PO number associated with purchase: _____

If using for travel, dates of travel: _____

Expenses:

Vendor Name:

Amount of Expense:

_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

The use of the University credit card is a privilege and may only be used with prior approval from the Business Office. Once your single use approval has occurred, you agree to dispose of the card information. Credit card information is not to be shared with anyone outside the organization except to the vendor.

Per the University Purchasing Policy and Procedures, we are not allowed to pay for items such as travel insurance, upgraded flights, seat selection, taxes, etc. Travel is not to be procured with any booking organization that charges fees such as (Travelocity, Expedia, etc.). If charges are made that are not allowable, you may be held personally responsible for those charges. If you have a question about whether an item is covered, please reach out to us.

By using the card, you agree to provide **ITEMIZED** receipts for any charges that occur upon **use** of the card. Any charges for which itemized receipts are not received will require reimbursement to the University.

By signing the below, you agree to the terms of usage and all University Purchasing Policies and Procedures:

Date _____

