



P-Card Purchase Form

Club/Organization:

Event:

Date and Time of event:

Location of event:

of people expected:

Contact Person:

Email:

Vendor:

Delivery Location:

Time of Delivery:

Total Cost: _____

Signature of Event Representative: _____ Date: _____

Director of Student Activities: _____ Date: _____

NOTES FOR P&S CLUB:

Account Number: _____ Sub-code: _____

Account Number: _____ Sub-code: _____

Account Number: _____ Sub-code: _____