HAS-PCARD PURCHASE AUTHORIZATION FORM

HAS LOG #		***PURCHASE DATE***	
VENDOR		***CARD USED***	HAS-AIR ☐ HAS-WATER ☐ OTHER ☐
PI ON ACCOUNT		***CARD USER***	
RECEIPT NO.		***TRAVEL AUTH #***	

List Each Item Purchased	*Amount*	*KFS Account*	*Sub Account*	*Object Code*
Subtotals	0.00			
Sales Tax				
Shipping				
Tip < 20% of ***Subtotal only***				
Total Amount Charged	0.00			

PURPOSE FOR PURCHASE. *Indicate how it relates to and benefits the account charged. If an event or conference, list location, dates and title. If for a restaurant purchase list event, date, title of event, agenda and list of attendees.*

PI SIGNATURE (Blue Ink):

Business Office Use Only

E-DOCK #	***TRANSACTION #***

06/16/2023

Reconciled by (initials) _____