Park University **Month _____ Year _____**

Procurement Card Purchase Log **Date Submitted _____**

4715-6246-01_____

_____

Employee Name

The product/services listed below are for the use of Park University and are being expended against an established account with available funds

Date	Vender Name	Description	Amount

Cardholder Signature **Date** **Approved by** **Date** **Total Charges**

This log, with all receipts attached, must be submitted on the fourth (4th) work day of each month to **Joseph Tristanio, Park University PMB 50, 8700 NW River Park Drive, Parkville, MO 64152.**

Failure to submit this report with all receipts attached will result in loss of use of the Purchasing Card.

JAT:mj 11/10/2009