PURCHASING DEPARTMENT

AWARDS, GIFTS, AND PRIZES DISTRIBUTION LOG

DATE: _____ PURPOSE: _____

P-CARD HOLDER NAME: _____ DEPARTMENT: _____

DATE	RECIPIENT NAME	RECIPIENT SIGNATURE	ITEM	VENDOR	AMOUNT

***Please use additional sheets as needed. If the distribution is after the closing date of the P-Card Statement, please submit this form by campus mail or email to the P-Card Administrator/Purchasing Department.

P-Card Holder Signature: _____

Date

Supervisor Signature: _____

Date

01/2020