

SCAN: \_\_\_\_\_ REF#: \_\_\_\_\_

NAVAJO COUNTY EXTENSION

Doc Nbr: \_\_\_\_\_

POST: \_\_\_\_\_ RUSH: \_\_\_\_\_

PURCHASING CARD LOG / USE FORM

Complete this form immediately after purchase on card. All documentation (receipts, packing slips, invoices, etc.) must be submitted.

Cardholder: \_\_\_\_\_ Purchase Date: \_\_\_\_\_

Vendor: \_\_\_\_\_ Deliver To: \_\_\_\_\_

State: \_\_\_\_\_ Zip: \_\_\_\_\_ Phone: \_\_\_\_\_

Contact: \_\_\_\_\_ Travel Authorization #: \_\_\_\_\_

Item Description	Amount	Account	Object Code
AZ State Sales Tax No.: _____	SHIPPING:		5560

If vendor is located in another state, request their AZ State Sales Tax Number. If they do not have one, enter NONE in the blank and a Use 6.6% Tax will be added by UA FSO.

USE TAX: \_\_\_\_\_

SUBTOTAL: \_\_\_\_\_

Tax Exempt

SALES TAX: \_\_\_\_\_

Commodity

KFS TOTAL: \_\_\_\_\_

TOTAL AMOUNT: \_\_\_\_\_

Service

State purpose for purchase (Identify Program / Project if applicable):

Expense / Income Categories - Be sure to designate sub-category as applicable.

- |   |   |
|---|---|
| <input type="checkbox"/> Agent Resource             | <input type="checkbox"/> 4001661 - 4H Mentoring             |
| <input type="checkbox"/> Travel                     | <input type="checkbox"/> 4002233 - SNAP-Ed                  |
| <input type="checkbox"/> General Office             | <input type="checkbox"/> 4557131 - First Things First       |
| <input type="checkbox"/> Satellite Office - Pinetop | <input type="checkbox"/> 5401200 - 4-H Programs             |
| <input type="checkbox"/> 1230580 - State            | <input type="checkbox"/> 5534400 - Navajo Gifts             |
| <input type="checkbox"/> 2195100 - IDC              | <input type="checkbox"/> 5711000 - County _____             |
| <input type="checkbox"/> 2378200 - Conference       | <input type="checkbox"/> Extension Programs - Patti B _____ |
| <input type="checkbox"/> 2468700 - Ext. Misc. _____ | <input type="checkbox"/> Other: _____                       |

Reconciled: \_\_\_\_\_

Date: \_\_\_\_\_

Approved: \_\_\_\_\_

Date: \_\_\_\_\_