University of Arizona
Steward Observatory Business Office
PURCHASING CARD TRANSACTION

Trans No.

Ordered By:		**Purchase Date:**	
Deliver To:			
Vendor:			
Address:		**City:**	
State:		**Zip Code:**	**Telephone:**
Contact:			

State Purpose of purchase (identify project, if applicable):

Quantity	UOM	Item Description	Amount	Account/Object Code/Unit♦
		AZ Sales Tax No.		♦*to be completed by*
		Shipping/5560		*Business Office*
		TOTAL AMOUNT:		

*If using a vendor that is located in another state, request their Arizona Sales Tax Number. If they do not have an Arizona Sales Tax Number, enter *NONE* in the blank, and the use tax will be added by the University Financial Services Office.

Order Placed By: ❑ Fax ❑ Phone ❑ Vendor Location ❑ Internet ❑ Other _____
Transaction Type: ❑ Commodity ❑ Service

Authorized By:		**Date Authorized:**	

Check List:
1. ❑ Form completed
2. ❑ Sales Tax included on Form / NA
3. ❑ Method of delivery: ❑ Vendor ❑ UPS ❑ US Mail ❑ Other _____
4. ❑ Itemized Vendor Receipt or Packing Slip: ❑ Attached ❑ Pending Delivery

Forward completed Form and attachments to Business Office

Status of Form: *(to be completed by Business Office)*

Reconciled By:		**Date Reconciled:**	
Approved By:		**Date Approved:**	
Copied By:		**Date Copied:**	