



# DEBIT CARD REQUEST

Requester: \_\_\_\_\_ Date of Request: \_\_\_\_\_

Title of Requester: \_\_\_\_\_

## Purchase Information

Items to be Purchased	Amount

Justification (reason must include why a Government Purchase Card cannot be used)

Supervisor Authorization Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Title: \_\_\_\_\_

## Accounting Information

Detailed Item Description	Cost Center (xxxx)	Command Key (xx)	Account (xxxx)	Sub Account (000 or UFM)	Department (xxxx)	Amount
<b>Total</b>						

FINANCE USE ONLY	CARD RETURN
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Card Number: \_\_\_\_\_

Printed Name: \_\_\_\_\_

Issued to (signature): \_\_\_\_\_

Requester Contact Number: \_\_\_\_\_

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

Return by Date: \_\_\_\_\_

Issued by: \_\_\_\_\_

**Finance**

Received from (print): \_\_\_\_\_

Signature: \_\_\_\_\_

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

Received by: \_\_\_\_\_

**Finance**