



NEBO SCHOOL DISTRICT ADMINISTRATIVE DIRECTIVE

Directive
No.
3.2


SECTION: FINANCE
TITLE: PURCHASING CARD PROCEDURES
DATE: March 2023
SUPERINTENDENT APPROVAL: 

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1. SUMMARY

Nebo School District (District) will provide purchasing cards to approved employees to be used for purchases that are within dollar limits established for cardholders. The purchasing cards are primarily intended to provide flexibility to employees and increase the ease in which they can make necessary small-dollar purchases. In all cases, purchasers will strictly follow District purchasing policies and guidelines and all transactions are to be reconciled, reviewed, and accounted for on a monthly basis.

2. DEFINITIONS

- 2.1. **“Submission Packet”** is comprised of a completed Monthly Checklist Form, cardholder monthly statement, and all receipts and other documentation to support purchases.
- 2.2. **“Card Administration Website”** refers to the website maintained by US Bank which allows District purchasing card administrators to view transactions, manage accounts, and extract data.

3. ELIGIBILITY

To be eligible to use a purchasing card, an employee must (1) be employed in a position having a reasonable need to make purchases using District or school funds, (2) complete a Purchasing Card Application and Cardholder Agreement (Application), (3) obtain the approval of his or her supervisor as indicated by the supervisor’s signature on the Application, (4) deliver the Application to the Operations Department, and (5) be approved by the Operations Department.

The Operations Department will (1) review all Applications for completeness including the proper signatures, (2) review all Applications for appropriateness including default account to be used for purchases and requested limits, (3) enter the information into the Card Administration Website, and (4) file the Application in a manner that allows ready and easy retrieval.

Issued purchasing cards will be received by the Operations Department and the Operations Department will deliver the purchasing card to the cardholder along with a copy of this Directive

document and all applicable forms and training materials. The cardholder will then take necessary steps to activate the card before use.

4. USE

For most cardholders, the purchasing card is to be used for small-dollar purchases that do not require bids and is intended to ease the process of making necessary acquisitions. In all cases, District purchasing policies and guidelines are to be strictly followed. If the purchasing card is used for a purchase that requires bids, the Bid Record Form must be completed and submitted as part of the Submission Packet.

Cardholders are encouraged to make sales tax-exempt purchases when appropriate. If a purchase is eligible for an exempt of sales tax but sales tax is charged to and paid by a cardholder, the cardholder is expected to seek a refund of the tax inappropriately charged. The District Finance Department will not pursue refunds of taxes charged on eligible tax-exempt purchases.

5. MONTHLY CARDHOLDER PROCESS

Within 7 (seven) days of the statement closing date, which is typically the 10th day of each month, the cardholder will (1) access the bank website (as more fully described in Exhibit A -- Purchasing Card Website Navigation) to obtain the cardholder statement and to make changes (if any) to the account that a particular transaction will be posted to, (2) complete in entirety the Monthly Checklist Form (Checklist), (3) reconcile all transactions to detailed receipts and document the purpose of each purchase and the accounting code charged, (4) compile a Submission Packet, and (5) deliver the Submission Packet by the 20th day of the month that includes the statement closing date to appropriate personnel for approval as follows:

Cardholder	Approval Performed by	Review Performed by	Documentation Storage Location
Principal	Principal	School Secretary	School Finance Office
Assistant Principal	Principal	School Secretary	School Finance Office
School Secretary	Principal	Principal	School Finance Office
Athletic Director	Principal	School Secretary	School Finance Office
School Checkout Card	Principal	School Secretary	School Finance Office
Regular Teacher	Principal	School Secretary	School Finance Office
CTE Teacher	CTE Director	CTE Secretary	CTE Office
Special Ed Teacher	Special Ed Director	District Accountant	District Finance Office
Superintendent	Superintendent	District Accountant	District Finance Office
Assistant Superintendent	Superintendent	District Accountant	District Finance Office
Business Administrator	Superintendent	District Accountant	District Finance Office
Department Director	Superintendent	District Accountant	District Finance Office
Department Supervisor	Department Director	District Accountant	District Finance Office
Department Employee	Department Supervisor	District Accountant	District Finance Office
Others not defined above	Supervisor	District Accountant	District Finance Office

6. MONTHLY APPROVAL PROCESS

The approver of the cardholder monthly transactions will (1) ensure Submission Packets are received from all cardholders who made purchases during a particular month, (2) review all transactions for appropriateness, (3) discuss any compliance issues observed or other concerns with the cardholder, and (4) submit approved Submission Packets by the 25th day of the month that includes the statement closing date to appropriate personnel for review as shown in 5 above.

7. MONTHLY REVIEW PROCESS

The reviewer of the cardholder monthly transactions will (1) ensure Submission Packets are received from all cardholders who made purchases during a particular month, (2) review by the last day of the month that includes the statement closing date all Monthly Checklist Forms, receipts, and other documentation submitted to ensure purchases are appropriate and to determine if submitted documentation is sufficient to support the purchase, and (3) ensure any purchases involving equipment to be inventoried properly follow Nebo School District Policy #DID, Asset Inventory.

When reviewing receipts, reviewers should ensure the account charged and purpose of each purchase is documented. Ideally, an original receipt (not a copy or reproduction) should be provided for all purchases. If a receipt is not available, purchases should be accompanied by the Missing Receipt Form. All purchases involving food or meals must be accompanied by a completed Meal Record Form, and all purchases requiring bids must be accompanied by a Bid Record Form.

Sales tax charges for in-state lodging may be refundable by the Utah State Tax Commission if the purpose of the lodging is for an essential government function and meets certain other requirements. For any in-state lodging charged to a purchasing card, the monthly reviewer should make an effort to obtain a refund of the lodging-related sales tax by providing a copy of both the lodging invoice and cardholder monthly statement to the District Finance Department or, in the case of cardholders employed in high schools, by coordinating with the high school finance secretary. The District Finance Department or high school finance secretary will attempt to obtain a refund of the lodging-related sales tax. Any tax refund amounts received will be credited back to the accounts where the lodging-related sales tax was originally charged.

If compliance issues are discovered (documents not submitted or after deadline, insufficient documentation for purchase, inappropriate purchases, etc.), the reviewer will (1) complete the Corrective Action Form and (2) route the Corrective Action Form to the Director of Operations for approval of actions to be taken. Upon approval, the Operations Department will (1) take appropriate action on the purchasing card (inactivate, reduce limit, etc.), (2), route a copy of the Corrective Action Form to the cardholder and the cardholder's supervisor, (3) route a copy of the Corrective Action Form to the Human Resources Department if potential employment related disciplinary actions exist, and (4), file the Corrective Action Form in a manner that allows ready and easy retrieval.

8. DOCUMENTATION RETENTION

Monthly Submission Packets will be kept secure for at least five (5) years and filed in a manner that allows for ready and easy retrieval in locations as shown in 5 above.

Completed Applications and Cardholder Agreement Forms, Change Request Forms, and Corrective Action Forms will be kept secure by the Operations Department for as long as the cardholder is a District employee plus five (5) years and filed in a manner that allows for ready and easy retrieval.

9. DEFAULT ACCOUNTS AND DISTRICT REIMBURSEMENT

Purchasing card charges for most school employees will default to 10-LOC-FY-1044-1000-611 where LOC indicates location number and FY indicates fiscal year. Program 1044 will only be used for purchasing card transactions. All purchasing card charges for non-school employees will default to their specific department supply account. It is the responsibility of cardholders to change accounts as needed in the bank website (as more fully described in Exhibit A -- Purchasing Card Website Navigation) prior to the cycle closing date if a particular transaction should be charged to a different account.

The District Finance Department will expect a payment from schools for the total amount charged to Program 1044 within one month of the posting of the transactions, which is typically the last day of each month. Payments received will be credited to the 10-LOC-FY-1044-1000-611 account. The District Finance Department will expect Program 1044 to be at a \$0 balance by the end of each fiscal year.

10. ACCOUNT CHANGES AND TERMINATIONS

Requests for purchasing card changes and terminations should be made using the Change Request Form. The cardholder or cardholder's supervisor requesting the change will (1) complete a Change Request Form, (2) obtain the approval of the cardholder's supervisor as indicated by the supervisor's signature on the Change Request Form, (3) deliver the Change Request Form to the Operations Department, and (4) have the change approved (or not) by the Operations Department.

The Operations Department will (1) review all Change Request Forms, (2) enter the change into the Card Administration Website if the change is approved, (3) notify the cardholder supervisor if a change request is denied, and (4) file the Change Request Form in a manner that allows ready and easy retrieval.

11. MONTHLY DISTRICT FINANCE DEPARTMENT PROCESS

Near the end of each month the District Finance Department will (1) download the transactions from the Card Administration Website and (2) upload and post the transactions into the District accounting system. The District Finance Department will also prepare a monthly report which will include a detailed listing of all purchases by cardholder name and provide the report to the District Finance/Audit Committee and District Internal Auditor.

EXHIBITS

Exhibit A -- Purchasing Card Website Navigation

REFERENCES

Nebo School District Policy #DID, Asset Inventory

FORMS

Purchasing Card Application and Cardholder Agreement
Purchasing Card Change Request Form
Purchasing Card Monthly Checklist
Purchasing Card Corrective Action Form
Purchasing Card Missing Receipt Form
Purchasing Card Meal Record Form
Purchasing Card Bid Record Form

EXHIBIT A – PURCHASING CARD WEBSITE NAVIGATION

A.1. Access

To access the purchasing card website, cardholders should log in to <https://access.usbank.com/>, enter NEBOSD as the organization short name, enter user ID and password, and click Login. User IDs and passwords are established when cards are first activated for use.

A.2. Cardholder Statement

To view and print a cardholder statement, follow the steps shown below after accessing the purchasing card website:


A.2.1. Select Account Information and then click on Cardholder Account Statement.

The screenshot shows the US Bank Access Online interface. At the top left is the US Bank logo and "Access Online". At the top right are "Chat With Us" and "Log Out" buttons. A navigation menu on the left includes "Request Status Queue", "Active Work Queue", "System Administration", "Account Administration", "Transaction Management", "Account Information", "Statement", "Account Profile", "Reporting", "Data Exchange", and "My Personal Information". The "Account Information" section is expanded, showing "View account statement(s)" with sub-links for "Cardholder Account Statement", "Managing Account Statement", and "Diversion Account Statement". The "Account Profile" section is also visible with sub-links for "Cardholder Account Profile", "Managing Account Profile", and "Diversion Account Profile". The footer contains "© 2022 U.S. Bank" and an "Accessibility Policy" link.

A.2.2 Select the desired statement closing date and click View Statement.

The screenshot shows the "Account Statements" page for NEBO SCHOOL DISTRICT. It displays the account unique ID and account number. A note states: "Please Note: The statement can't be used for remittance of payment, it's for display purposes only." Below this, there is a "View account profile" link. A list of statements is shown for the years 2023 and 2022. A red arrow points to the "02/10/2023 (PDF)" link. The 2022 statements include: 11/10/2022 (PDF), 10/10/2022 (PDF), 08/10/2022 (PDF), 07/11/2022 (PDF), 05/10/2022 (PDF), 03/10/2022 (PDF), 02/10/2022 (PDF), and 01/10/2022 (PDF). The footer includes "US Bank Access Online", "Chat With Us", "Leave Account Statements", and "Log Out" buttons.

A.2.3 Click on the print icon to print a copy of the statement.



U.S. BANCORP SERVICE CENTER
P. O. Box 6343
Fargo, ND 58125-6343

NEBO SCHOOL DISTRICT

ACCOUNT NUMBER XXXX-XXXX-XXXX-XXXX

STATEMENT DATE 01-10-22

TOTAL ACTIVITY \$ 5,895.58

000007640 01 SP 106481444810469 S

NEBO SCHOOL DISTRICT
NEBO 11990712-005-STC
350 S MAIN ST
SPANISH FORK UT 84660-2408


"MEMO STATEMENT ONLY"
DO NOT REMIT PAYMENT

NEW ACCOUNT ACTIVITY					
POST DATE	TRAN DATE	TRANSACTION DESCRIPTION	REFERENCE NUMBER	MCC	AMOUNT
12-16	12-15	WAL-MART #4068 SPANISH FORK UT PUR ID: 1215214068 TAX: 0.00	24226381350400000717587	5411	1,000.00
12-17	12-16	WAL-MART #4068 SPANISH FORK UT PUR ID: 1216214068 TAX: 0.00	24226381351400000252949	5411	49.77
12-17	12-16	WAL-MART #4068 SPANISH FORK UT PUR ID: 1216214068 TAX: 0.00	24226381351400002154945	5411	243.58
12-17	12-16	WAL-MART #4068 SPANISH FORK UT PUR ID: 1216214068 TAX: 0.00	24226381351400005658660	5411	191.88
12-17	12-16	WAL-MART #4068 SPANISH FORK UT PUR ID: 1216214068 TAX: 0.00	24226381351400006506207	5411	139.04
12-17	12-16	WAL-MART #4068 SPANISH FORK UT PUR ID: 1216214068 TAX: 0.00	24226381351400006627300	5411	48.32
12-17	12-16	WAL-MART #4068 SPANISH FORK UT PUR ID: 1216214068 TAX: 0.00	24226381351400007150807	5411	150.00

A.3 Account Code Modifications by Transaction

To modify the account that a particular transaction will be posted to, do the following:

- A.3.1** Select Transaction Management, enter account number or search criteria, and click Search.



Chat With Us Log Out

Request Status Queue
Active Work Queue
System Administration
Account Administration
Transaction Management
• Transaction List
Account Information
Reporting
Data Exchange
My Personal Information

Transaction Management

Transaction List
View, review, allocate/reallocate and add comments to transaction information.

[View Previous Cycle](#)
Presents the Transaction list for the previous cycle.

A.3.2 Select the billing cycle close date and click Search. A list of transactions will appear.

usbank Access Online

Transaction Management
Card Account Summary with Transaction List

Card Account Number: ***** NEBO SCHOOL DISTRICT
Card Account ID: ***** NEBO SCHOOL DISTRICT

» Trans List

[-] Card Account Summary

Account Number: ***** NEBO SCHOOL DISTRICT
Account Name: NEBO SCHOOL DISTRICT

Billing Cycle Close Date: [Dropdown] Search Print Account Activity

Open Account

[+] Search Criteria Return to top

[-] Transaction List Return to top

Records 1 - 1 of 1

Select	Status	Trans Date	Posting Date	Merchant	City/State	Amount	Detail
<input type="checkbox"/>		01/12	01/13	SOUTHWES *****	800-435-9792, TX	\$2,100.00	

Disputed Reallocated Trans Detail Level

A.3.3 Select the transactions that need accounting code changes and click Reallocate.

Transaction Management
Card Account Summary with Transaction List

Card Account Number: ***** NEBO SCHOOL DISTRICT
Card Account ID: ***** NEBO SCHOOL DISTRICT

» Trans List

[-] Card Account Summary

Account Number: ***** NEBO SCHOOL DISTRICT
Account Name: NEBO SCHOOL DISTRICT

Billing Cycle Close Date: [Dropdown] Search Print Account Activity

Open Account

[+] Search Criteria Return to top

[-] Transaction List Return to top

Records 1 - 1 of 1

Select	Status	Trans Date	Posting Date	Merchant	City/State	Amount	Detail
<input type="checkbox"/>		01/12	01/13	SOUTHWES *****	800-435-9792, TX	\$2,100.00	

Disputed Reallocated Trans Detail Level

Records 1 - 1 of 1

Reallocate Mass Reallocate

A.3.4 Change account segments as needed and click Save Allocations.

Transaction Management
Reallocation Worksheet

Card Account Number: *****0000, NEBO SCHOOL DISTRICT [Switch Accounts](#)
Card Account ID: *****

Reallocate transactions by changing the accounting information to allocate the amount to a different cost center. To allocate to additional accounting codes, click the "Add Alloc" link.

After modifying the allocations, click the "Save Allocations" button to save changes. Exclude transactions from the save by selecting "Remove Transaction(s)" checkboxes and optionally clicking the "Remove Transaction(s)" button.

* = required

Remove Trans	Trans Date	Merchant	Amount	Alloc %	Accounting Code - Segment Name (Length)					
					FUND (*)	LOCATION (*)	YEAR (*)	PROGRAM (*)	FUNCTION (*)	OBJECT (*)
<input type="checkbox"/>	01/12/2022	SOUTHWEST	\$2,100.00	Add Alloc	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Search

Remove Trans

Save Allocations





PURCHASING CARD APPLICATION AND CARDHOLDER AGREEMENT

Please print the following information:

Last Name First Name Date of birth

School / Department Name Title or Position

Residential Address City State Zip

Default account number

I, the undersigned, hereby make application for a Nebo School District (District) purchasing card (card) and agree to abide by the terms and conditions relative to holding and using such card including the following:

1. I agree to limit the use of the card to purchases that are only applicable to my employment with the District.
2. I acknowledge and agree to abide by the card limitations that extend to the types of products and services that may be purchased and the expenditure amounts allowed per transaction and per monthly cycle.
3. I agree to voluntarily surrender the card if charges exceed the spending and / or product and service limits associated with the card in violation of the State of Utah Public Officers' and Employees' Ethics Act (Utah Code Annotated Section 67-16) or District purchasing policy.
4. I agree to surrender the card upon termination of employment for any reason and surrender all privileges associated with the card. The same applies if my employment responsibilities change such that the possession of the card is no longer necessary.
5. I agree that using the card to obtain cash advances or purchases of personal items or services, even with the intent to reimburse the District, constitutes unauthorized use of the card. Additionally, I agree that using the card in such a manner as to subdivide purchases with the intent to avoid dollar limitations or to disguise the nature of goods and / or services purchased or their source constitutes unauthorized use.
6. I agree that I am personally responsible for unauthorized purchases made with the card. Any unauthorized expenditures that remain unresolved in excess of ninety (90) days shall be subject to collection by the District.
7. I agree that I will allow no other persons the use of my card or to act as my agent in transactions.
8. I agree and understand that the District reserves the right to exercise card cancellation, wage garnishment (including associated costs), disciplinary action, civil litigation, and termination of employment as a remedy for flagrant, excessive, or unauthorized use of the card or for violation of any part of the terms of this agreement.
9. If the card is lost or stolen, I agree to immediately notify U.S. Bank by telephone (1-800-344-5696). I will confirm the telephone conversation by mail and will address correspondence to U.S. Bank Corporate Payment System, 1010 South Seventh Street, FBTT0202, Minneapolis, MN 55415 or by facsimile (1-701-461-4110) with a copy of the notification to my supervisor and the District Program Administrator.
10. As the card is District property, I understand that I may be periodically required to comply with control procedures designed to protect District assets. This may include being asked to produce the card to validate its existence and account number. I may also be asked to produce receipts, supporting documentation, and statements to audit usage. Failure to comply with requests within five (5) working days shall constitute unauthorized use.
11. I will receive a monthly statement directly from U.S. Bank which will report all activity during the statement period. Since I am responsible for all charges on the card, I will resolve any discrepancies by first contacting the supplier then the bank (1-800-244-5696).

Applicant Signature

Date

Supervisor Signature

Date

OPERATIONS DEPARTMENT USE ONLY

\$ _____ \$ _____ _____ - _____ - _____ - _____ - _____
Approved per transaction limitation Approved per month limitation Approved default account number

Entered into card administration system

Added to purch-card@nebo.edu list

Authorized Signature

Date



**PURCHASING CARD CHANGE
REQUEST FORM**

Please print the following information:

Name on Card

School / Department Name

Title or Position

Purchasing Card Number

I, the undersigned, hereby request changes to my purchasing card as indicated below. I understand and agree to abide by the terms and conditions relative to holding and using such card included in my application and cardholder agreement.

- Change per transaction limitation to \$ _____
- Temporarily change per transaction limitation to \$ _____ from ____ / ____ / ____ to ____ / ____ / ____
- Change per month limitation to \$ _____
- Temporarily change per month limitation to \$ _____ from ____ / ____ / ____ to ____ / ____ / ____
- Change default account number to _____ - _____ - _____ - _____ - _____ - _____
- Terminate purchasing card effective ____ / ____ / ____

Cardholder Signature

Date

Supervisor Signature

Date

OPERATIONS DEPARTMENT USE ONLY

- Changes approved
- Changes denied and communication made with cardholder and/or supervisor
- Changes entered into card administration system

Authorized Signature

Date



PURCHASING CARD MONTHLY CHECKLIST

Please print the following information:

Name on Card

Purchasing Card Number

Cycle Ending Date

\$ _____ Total amount expended this cycle

_____ Total number of transactions this cycle

_____ Total number of attached receipts

_____ Total number of Missing Receipt Forms used this cycle

\$ _____ Total Utah sales tax included in expenditures

- Review all purchases listed on your monthly statement to ensure they are accurate. If there is an incorrect transaction on your statement, please contact the vendor first to try to resolve the problem. If this proves unsuccessful, contact U.S. Bank at 1-800-344-5696.
- Log in to the bank website within seven (7) days of the cycle end date to make any necessary changes to expenditure account codes.
- Match up all transactions listed on your monthly statement with detailed receipts and other supporting documentation. If you do not have appropriate supporting documentation for a transaction, please complete a Missing Receipt Form. The Missing Receipt Form should be used minimally and does not take the place of an actual receipt.
- For all purchases, please document the purpose for the expenditure to justify the use of public funds and please document the accounting code to be charged.
- For all purchases that involved food, please complete the Meal Record Form and document those who attended along with the purpose.
- For all purchases that involved equipment or assets to be inventoried, please ensure a Nebo approved asset tag is affixed to the purchased item and please ensure the item is documented in the Nebo Fixed Asset tracking software.
- For all purchases that required bids, please complete the Bid Record Form.
- Compile the following information into a submission packet in the following order:
 - This Checklist
 - Monthly statement
 - All original receipts and other supporting documentation (such as Missing Receipt Forms, Meal Record Forms, and Bid Record Forms) stapled together in the transaction order shown on your statement.
- Make copies of all documents for your files.
- Check off each item on this checklist that you are compliant with and sign this checklist
- Send completed submission packet to your supervisor by the 20th day of the month following the cycle end date.

I have reviewed all items reported on the monthly purchasing card statement and assume responsibility for its accuracy. The information on this checklist is correct and I have resolved any problems with vendors and / or U.S. Bank. I certify that to the best of my knowledge, Nebo School District purchasing policies have been strictly adhered to for expenditures made with this card.

Cardholder Signature

Date

Approver Signature

Date

REVIEWER USE ONLY

Date received: _____

Compliance issues noted

Corrective Action Form completed (if necessary)

Reviewer Signature

Date



**PURCHASING CARD CORRECTIVE
ACTION FORM**

Please print the following information:

Last Name First Name Initial

School / Department Name Cycle Ending Date

Purchasing Card Number

The following noncompliance issues were noted during review of expenditures for the cycle ending date shown above:

- Checklist not completed or not accurate
- Checklist not received by approver or reviewer by due date
- Exceeded the transaction or monthly card expenditures limits
- Inappropriate expenditure(s)
- Lack of receipts or other supporting documentation for expenditure(s)
- Failure to comply with review requests or requirements
- Allowing others to use card or act as agent for purchases
- Failure to report a lost or stolen card
- Failure to initiate corrective action on erroneous or fraudulent charges
- Other: _____

Due to the above findings, the following actions are recommended:

- Cardholder placed on probationary status. If violations noted above are not corrected within thirty (30) days, purchasing card privileges may be terminated.
- Termination of purchasing card privileges
- Refer for employment related disciplinary action

Reviewer Signature Date

OPERATIONS DEPARTMENT USE ONLY

- Above actions approved and taken Above actions denied and communication made with recommending reviewer
- Copy given to cardholder
- Copy given to cardholder supervisor
- Copy given to Human Resources Department (if necessary)

Operations Director Signature Date



**PURCHASING CARD MISSING
RECEIPT FORM**

Please print the following information:

Last Name

First Name

Initial

School / Department Name

Cycle Ending Date

Purchasing Card Number

Date of Purchase: _____

Vendor: _____

Amount: \$ _____

Detailed Description: _____

I, the undersigned, hereby acknowledge that detailed receipts are required for all transactions and that this form is to be used in the rare case that a receipt is not available. I further reaffirm my understanding that using the card in such a manner as to disguise the nature of goods or services constitutes unauthorized use.

Cardholder Signature

Date



**PURCHASING CARD MEAL
RECORD FORM**

Please print the following information:

Last Name

First Name

Initial

School / Department Name

Cycle Ending Date

Purchasing Card Number

Date of Purchase: _____

Vendor: _____

Amount: \$ _____

Individuals in Attendance: _____

Purpose: _____



**PURCHASING CARD
BID RECORD FORM**

Please print the following information:

Last Name

First Name

Initial

School / Department Name

Cycle Ending Date

Purchasing Card Number

Date of Purchase: _____

Vendor: _____

Amount: \$ _____

Description of Item(s): _____

Bids Obtained:

Vendor: _____

Contact Name: _____

Phone: _____

Amount: \$ _____

Date of Bid: _____

Vendor: _____

Contact Name: _____

Phone: _____

Amount: \$ _____

Date of Bid: _____