RESET FORM

Texas A&M Agriculture

Purchasing Card Internal Order Transaction Log

AG-613
Revised 2-2-06

☐ Texas Agricultural Experiment Station ☐ Texas Cooperative Extension

Statement Closing Date:

Card Number: XXXX-XXXX- _ _ _ _ _ _ _ _ _ _ _ _

Cardholder Name:

Cardholder Signature: Cardholder Signature Required

NOTE: Follow Q-doc process on Controlled Preliminary Fixed Asset items for Texas A&M Agriculture Property as described in the Purchasing Card Program Guide.

Dept/Unit Name:

Dept/Unit Contact/Phone:

Dept/Unit Approval: Unit Approval Signature Required

I approve the purchase of all items described in this document & that this order falls within the purpose for which the account was established. I will assist in resolving any problems associated with the delivery of payment of these goods or services.

TOTAL AMOUNT REQUESTED FROM STATE

DATE SUBMITTED TO DISBURSEMENTS

TRANSACTION LOG TOTAL $0.00

Order Date	Cross Ref #	Vendor Name / Vendor # (for State Funds only)	Description	Amount	Delivery Date	Moved To Account/Code	Date Reallocated/ By Whom
	1						
	2						
	3						
	4						
	5						
	6						
	7						
	8						
	9						