

For Purchasing Office Use Only

Purchasing Received Date: _____

Reviewed By: _____

SUNY CORTLAND - PROCUREMENT LOG

Page _____ of _____

Cardholder: _____

Statement Month and Year: _____

Department: _____

Statement Total: _____

	Transaction Date	Vendor	Item Description	Price	Date Received	Account Number	Comments/Notes
1							
2							
3							
4							
5							
6							
7							
8							
9							
10							
11							
12							
13							
14							
15							

TOTAL

Cardholder's Certification: I, certify that all transactions identified above are correct and just, that payment is approved, and that the goods or services furnished were for the performance of the official duties of this cardholder.

Cardholder's Signature: _____ Date: _____

Supervisor's Signature (REQUIRED): _____ Date: _____

Supervisor's Name (Print): _____ Title: _____