OLD DOMINION UNIVERSITY
GE MasterCard Corporate Payment Services
(Revised October 2005)
MONTHLY LOG OF PURCHASES
(Logs must be received in Accounts Payable not later than the 5th of each month.)

Department	**Budget Code:**	**Cardholder:**
Billing Date: From **To:** *(Billing Cycle – 16th – 15th of the following month))*		**Card Number:**

Include all charges and/or credits for statement period.

Date of Purchase		**Vendor Name Vendor Website Address**	**Description of Purchase**	**Amount of Purchase/Credit**				**Notes**
				5480	**6101**	**7110**	**9650**	
				$	$	$	$	
				$	$	$	$	
				$	$	$	$	
				$	$	$	$	
				$	$	$	$	
				$	$	$	$	
				$	$	$	$	
				$	$	$	$	
				$	$	$	$	
				$	$	$	$	
				$	$	$	$	
				$ TOTAL	$ TOTAL	$ TOTAL	$ TOTAL	

SUB ACCOUNT CODE 5480 – SERVICES *SUB ACCOUNT CODE 6101 – SUPPLIES* *SUB ACCOUNT CODE 9650 – EQUIPMENT* *SUB ACCOUNT CODE 7110 – AIRLINE AND MASS TRANSIT TICKETS*

☐ CHECK HERE IF NO TRANSACTIONS FOR THIS PERIOD.

(A copy of this form and the corresponding receipts must be retained in the department for three years.)

"I hereby certify that this is for goods and services purchased and received in accordance with all State and University regulations."

_____
(Signature - Cardholder / Date)

_____
(Signature – Cardholder's Supervisor / Date)