OLD DOMINION UNIVERSITY

Bank of America Visa

(Revised August 2009)

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 (Last four digits only):**

Include all charges and/or credits for statement period.

Date of Purchase	**DMBE SWaM Vendor** "X"	**Vendor Name** **Vendor Website Address**	**Description of Purchase**	**Please use the sub account code that best describes the item or services purchased.**		**Notes/Contract #**
				Sub Account Code	**Amount of Purchase or Credit**	
					$	
					$	
					$	
					$	
					$	
					$	
					$	
					$	
					$	
					$	
					$ $ TOTAL	

☐ 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 the specified goods and services (i) are essential and necessary, (ii) appropriately budgeted for, (iii) have been properly received, (iv) are in compliance with the University's SWaM plan, and (v) directly support the mission of the University."

_____
(Signature - Cardholder / Date)

_____
(Signature – Cardholder's Supervisor / Date)