

# GENESEO

THE STATE UNIVERSITY OF NEW YORK

## NYS Citibank Visa Procurement Card Order Form

**Supplier Information:**

Supplier Name: \_\_\_\_\_

Transaction Date: \_\_\_\_\_

**Cardholder Information:**

Cardholder Name: \_\_\_\_\_

Department: \_\_\_\_\_

Cardholder Signature: \_\_\_\_\_

**Business Purpose/Statement of Need:****Items Ordered:**

QTY	UNIT	ITEM DESCRIPTION	UNIT PRICE	EXT TOTAL
<b>NYS Tax Exempt #14740026K</b>				

Subtotal

Shipping

Total

Account #:

Received by:

Received Date:

Notes:

NOTE: DEPARTMENT MUST RETAIN THIS RECORD AND ATTACH ORIGINAL RECEIPTS TO THE BACK.  
RECORDS MUST BE RETAINED BY THE DEPARTMENT FOR SIX (6) YEARS, PLUS THE CURRENT YEAR.  
ALL PCARD TRANSACTIONS ARE SUBJECT TO AUDIT AND MUST COMPLY WITH THE POLICIES AND PROCEDURES GOVERNING THE PROGRAM.

Revised 11/17