

NET Card Form

Cardholder Name: _____ **Month:** _____

Card Total: _____

<u>Account #</u>	<u>Description</u>	<u>\$ Amount</u>	<u>Business Purpose</u>
_____	Lodging	_____	_____
_____	Airfare	_____	_____
_____	Meals	_____	_____
_____	Taxi/Train	_____	_____
_____	Car Rental	_____	_____
_____	Other	_____	_____
	<u>Total \$\$</u>	_____	This total must match the card total listed above.

Other Comments/Explanations/Trip Dates:

Attendees:

Please attach ALL detailed itemized receipts and event agenda. Travel authorization may be required.

Card Holder and Supervisor or Department Chair Signatures are required.

Card Holder (signature): _____ Date: _____

Supervisor/Department Chair (print name): _____

Supervisor/Department Chair (signature): _____ Date: _____