



Gift Card Purchase Form

This form is to be used when gift cards are purchased and issued as awards and/or for random drawings.

Merchant Name: _____

Date of Purchase: _____ PURCHASE AMOUNT \$ _____

of Cards/Type: _____ ACCOUNT # _____

Name of Event: _____

	Card value	Date distributed	Gift Card Issued as:	Print name	Signature of recipient
Gift card 1					
Gift card 2					
Gift card 3					
Gift card 4					
Gift card 5					

Continue on next page if additional cards were issued. Card values totaled must equal purchase amount.

NOTE: Gift Card issued as an award will result in compensation and this notice will be submitted to the Payroll Office. If IRB, just place "N/A" in the print name column and "Confidential" in the signature line.

I, _____, the undersigned do certify that the above gift card purchase
(Type or Clearly Print Name)
 was for official university business and issued to the recipients listed above.

 Cardholder Signature

 DATE

 Supervisor Signature

 DATE