

GSA RECORD OF PURCHASE CARD ORDERS

1. FOR PERIOD ENDING: *(Date)*

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INSTRUCTIONS: Use this form to document orders placed that will be paid for using the Governmentwide Commercial Purchase Card Service. Reconcile the information on this form with your monthly statement of account, sign and date the form, and submit it with the statement to the approving official.

2. NAME OF CARDHOLDER *(As it appears on card)*

3. OFFICE SYMBOL

4A. DATE ORDERED	4B. SUPPLIER INFORMATION	4C. SIZE OF BUS.	4D. DESCRIPTION OF SUPPLIES OR SERVICES	4E. ORDERED				4F. RECEIVED	
				4E. QUANTITY	4F. UNIT OF ISSUE	4G. UNIT PRICE	4H. TOTAL PRICE	4I. DATE DELIVERED	4J. AMOUNT BILLED
	SUPPLIER'S NAME <hr/> SUPPLIER'S STREET ADDRESS <hr/> CITY ST ZIP CODE <hr/> REPRESENTATIVE'S NAME <hr/> ORDERED FOR								
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5. REMARKS

6. SIGNATURE OF CARDHOLDER *(Sign in ink)*

7. DATE