PURCHASE CARD LOG FOR BILLING PERIOD_____1 st, 19____THROUGH_____end of month 19____ **PAGE __OF__**

EXHIBIT C

PRINTED NAME OF PURCHASE CARDHOLDER: _____ **ACCOUNT NUMBER: 4716-68_____-0000-_____**

ITEMS PURCHASED PURCHASED	VENDOR/ MERCHANT	APPROVALS (IF APPROPRIATE)	DATE ORDERED	TOTAL COST	OBJECT CLASS	DATE RECEIVED
		Signatures/Title				
		Signatures/Title				
		Signatures/Title				
		Signatures/Title				
		Signatures/Title				
		Signatures/Title				

SIGNATURE OF PURCHASE CARDHOLDER:_____ **SIGNATURE OF APPROVING OFFICIAL:_____**

TELEPHONE NUMBER: **DATE:** **TELEPHONE NUMBER:** **DATE:**

SFO 27 USE ONLY

FINANCIAL DATA: **ACCOUNT NUMBER** **Obligation # 9__BK_____**

D.C.N.	BUDGET FISCAL YR	FUND	ORG.	PROGRAM	SITE./PROJEC	COST/ORG	OBJECT CLASS	AMOUNT	LINE #	STATEMENT DATE	BALANCE

SIGNATURE OF **TOTAL: _____**
FUNDS CERTIFYING OFFICIAL:_____ PHONE NUMBER_____
DATE:_____