St. Mary's College of Maryland
Purchasing Card Activity Log

Cardholder Name: **Function # on card: 110-** **Month: Aug 2007**

Order Date	Vendor	Description	Del. Date	Total $ Amount	Budget To Be Charged:			
					Fund	Function	Object	Subfund

Page 1 Subtotal	-
Page 2 Subtotal	-
Total Charges for Month	-

Cardholder Signature/Date Reconciled

Budget Manager Review Signature/Date

For Business Office Use:

Agency Fiscal Officer Review Signature/Date *Credit Object:70500*