

**DEPARTMENT OF PHYSICS
DUKE UNIVERSITY PURCHASING CARD RECORD**

CARD HOLDER: _____

PURCHASE DATE: _____

VENDOR: _____

BRIEF DESCRIPTION: _____

****FOR MEALS: WHO ATTENDED, SUBJECT OF DISCUSSION****

FUND CODE TO BE CHARGED:	DOLLAR AMT.	PERCENT:
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_____	_____	_____
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_____	_____	_____
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TOTAL: _____

****ADDITIONAL INFORMATION NEEDED BELOW FOR TRAVEL AND COMPUTER PURCHASES****

FOR TRAVEL/AIRFARE ONLY:

NAME OF TRAVELER: _____

LOCATION: _____

PURPOSE: _____

DATES: _____

FOR COMPUTER PURCHASES ONLY:

LOCATION OF COMPUTER: _____

BUSINESS PURPOSE: _____

PROPERTY OF DUKE UNIVERSITY: _____ YES _____ NO

*******PLEASE ATTACH ORIGINAL RECEIPT*******