Period:	//20	to	/	/20
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STUDENT ORGANIZATION DEBIT CARD PROGRAM **DEBIT CARD DISTRIBUTION LOG**

Student

Organization: _____ Officer: _____

Date Out	Card Distribution Details	Date In	Receipt Rec'd (Y/N)	Total Purchase Amount (\$)	Required Refund (\$)	Rec to Stmt (Y/N)
	Printed Name of Authorized Card User:		()			()
	Purpose of Card Distribution:					
	Group Activity Supported by Card Purchase(s):					
	Card Usage Limits:					
	Amount: \$ Period: / /2016 to / /2016					
	Authorized Card User Signature:					
	Notes:					
	Printed Name of Authorized Card User:					
	Purpose of Card Distribution:					
	Group Activity Supported by Card Purchase(s):					
	Card Usage Limits:					
	Amount: \$ Period: / /2016 to / /2016 Authorized Card User Signature:					
	Notes:					
	Printed Name of Authorized Card User:					
	Purpose of Card Distribution:					
	Group Activity Supported by Card Purchase(s):					
	Card Usage Limits:					
	Amount: Period: / /2016 to / /2016 Authorized Card User Signature:					
	Notes:					