<u>BL #</u>			<u>Bu</u>	yer's L	<u>og Req</u>	uest		
Vendor N	Jam	ne:						
Amount:								
Date of E								
Anticipat	ed	date of In	voice:					
Descripti	on/	Purpose_						
Code(s)	to c	charge: ((Indicates	required nu	mber of dig	its)		
Fund (4)	E	Func (4)	Obj (4)	Fac (4)	Project (5)	SubProject (5)	Ų	Amount
	Е							

Fund (4)	E	Func (4)	Obj (4)	Fac (4)	Project (5)	SubProject (5)	Program (5)	Amount
	E							
	E							
	E							

Requestor's Name:
Department:
Department Approval:

Finance Approval:	
i manee i ippio van	

You must attach copy of leave forms, rate quotes, board minutes, etc. Return receipts to finance upon use or completion of travel.

Finance to complete:

Visa Credit Card No._____

*_____

Exp. Date _____