FPMC PCARD USE FORM Submit along with detailed receipt

	Check if receipt					
is taped to back of						
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Card Holder: Purchase Date:					
Vendor Name:	nty:				
Cooperative Extension, a Division of Agriculture, Life and Verserves as a statewide network of knowledgeable faculty and Arizonans. Cooperative Extension provides a link between th Health Sciences (FCHS) through several outreach programs be	l staff that p ne university	orovides lifelong and the citizens	educational p of this state.	orograms fo Family, Co	or all nsumer, &
Items Purchased:					
Who Benefits: Students attending the Food Protection	Manager C	ertification (FPI	MC) class. ##	\ttendees	
Business Purpose : The FPMC class is one of many class the students will use the food safety education practy avapai County.		•	•	•	
Date & Location of Event:					
ATTENTION: An agenda and list of attendees are required for all f Agenda List of Attendees (indicate empty) *For a group of 25 or more, instead of a List of Attendees and their UofA Affiliation	ployee, DCC ndees, list	, stakeholder,eto	.) lte	mized Red attendanc	ceipt
FOR ADM	/IN USE	ONI Y			
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