

# SHORELINE COMMUNITY COLLEGE

## Credit Card Purchase Authorization Form

Requestor Name: \_\_\_\_\_ Date: \_\_\_\_\_

Department Name: \_\_\_\_\_ Credit Card #: \_\_\_\_\_

ctcLink Budget Code: \_\_\_\_\_

Vendor Name: \_\_\_\_\_ Purchase Limit (Maximum): \_\_\_\_\_

Brief Description of Items to be Purchased: \_\_\_\_\_  
For purchases up to \$750, Department Budget Manager must sign.  
For purchases above \$750, the Director of Financial Services must also sign.

### Department Budget Manager Authorization:

\_\_\_\_\_  
Print Name Date

\_\_\_\_\_  
Signature

### Financial Services Director Authorization (if applicable):\*

\_\_\_\_\_  
Print Name Date

\_\_\_\_\_  
Signature

### Department Vice President Authorization (if applicable):

\_\_\_\_\_  
Print Name Date

\_\_\_\_\_  
Signature

#### NOTES:

- 1) Please submit this completed form, including mandatory signature from Department Budget Manager, to [accountsreceivable@shoreline.edu](mailto:accountsreceivable@shoreline.edu).
- 2) The Director of Financial Services must review and add signature approval for all purchases above \$750.00.
- 3) The Department Vice President must review and add signature approval for all purchases above \$3,000.00.
- 4) **This form is used for monthly reconciliation of all credit card purchases made by the college.**
- 5) Purchase cards are checked in and out at the Cashier Office/Accounts Receivable in Building 5000.

\*VPBAS to sign in lieu of FS Director as needed



Revised: 9/5/2024