

Finance - 210 N. 4th St, 4th FL - San Jose, CA 95112 - Ext. Zip: 0139 408-924-1400 - 408-924-1499 (fax)

This form must be completed and submitted to your OSP Grants and Contracts Administrator when authorization is being requested to use the P-Card to purchase any items or services on the Restricted Purchase or Prohibited list. This form must be approved by your Grants and Contracts Administrator and the P-Card Administrator prior to purchasing the item.

I. Cardholder Information

Cardholder Name: _____	Today's Date: _____
Email Address: _____	Account Number: _____
Phone Number: _____	Mail Code: _____

II. Explanation

Please explain why you would like to purchase an item on the Restricted or Prohibited List:

III. Gift Cards

Grant / Account Number _____	Gift Card Purchase Period: _____
Grant Period: _____	Amount: _____
Provide explanation in section II.	

IV. Signature

By signing below, I approve and authorize the purchase of the item(s) requested above.

Cardholder Signature: _____	Date: _____
OSP G&C Administrator: _____	Date: _____
P-card Admin: _____	Date: _____