

Employee Cal Card Check-Out Request Form

Information required prior to Check-Out:

Department Name		Card # checked out
Employee Name	Phone	Email
		<u>\$</u>
Date of Check-Out	Est. Date of Return	Max Amount Requested to Spend
Purpose of check-out (Plea	se attach copy of Conference Requ	est Summary Form if annlicable)

Information Required When Returning Card:

- Itemized receipts for ALL transactions, showing:
- The <u>detail</u> of each transaction (itemized list of goods/services purchased; this includes itemized restaurant receipts)
- A written description/explanation of the charge (e.g., "meal for 3: John Doe, Jane Doe & Bob Smith" or "snacks & supplies for staff meeting")
- The printed name of the employee who made the charge
- Account number expense is to be charged to (if different from above)
- Signature of approval from site/department administrator authorizing expense
- Copy of Conference Request Form (if applicable)
- If card is lost , notify Purchasing Department immediately

NOTE: Barring extraordinary circumstances (e.g, loss of luggage by airline etc.), transactions for which no receipts are provided will be billed to the employee who checked out the card

I, the undersigned Cuesta College Employee, understand and agree to the requirement and financial responsibilities associated with the check-out and use of the Cuesta Check-Out Cal Card. Furthermore, I agree to adhere to the Cuesta College Card Policies and Procedures as outlined in the Cal Card Policy and Procedures Handbook. I acknowledge that I have received a copy of said policies and procedures.

Employee Name Date

Department Name	Account String
FOUNDATION ECUMBRANCE	
After reviewing the request and verifying that the department/sit expenses, I authorize the employee named to check out a Cuesta	
Maximum amount authorized to spend: \$	
Fund Budget Manager	Date
000000000000000000000000000000000000000	100000000000000000000000000000000000000
FISCAL SERVICES APPROVAL:	
I, Director of Fiscal Services for Cuesta College, have reviewed the reque	est and authorize issuance of a
Check-Out Cal Card as requested.	
Director of Fiscal Services	Date
Budget Specialist	Date
Exception: Approval of non-travel/conference expenses	
VP of Administrative Services (Must sign for any exceptions)	Date

EMAIL THIS FORM TO purchasing@cuesta.edu ONCE ALL ELECTRONIC SIGNATURES HAVE BEEN OBTAINED AND THE DOCUMENT IS COMPLETE.

