



**Controller's Office
P-Card Purchasing Shared Service Form**

Requester Information

Name		USC ID	
Email		Phone Number	

Purchase Information

Merchant		Amount	
Description of Purchase:			

Chartfield

Operating Unit	Department	Fund	Account	Class	PC Bus. Unit	Project	Activity	Cost Share

Note: Department approval should follow workflow approver for the department listed above

Requester Signature: _____ Date: _____

Departmental Approver
Signature: _____ Date: _____

PI Signature:
(USCSP projects only) _____ Date: _____