LAKE SUPERIOR STATE UNIVERSITY

DEPARTMENTAL / NON-CARDHOLDER USAGE LOG

CARDHOLDER:_____ DEPARTMENT:_____

CARD NUMBER:_____ MONTH/YEAR:_____

NOTE: Non-cardholders, including students, faculty, & staff, checking out a purchasing card **must** also sign an **Employee Agreement** prior to using the purchasing card.

DATE	NAME & SIGNATURE OF PERSON CHECKING OUT CARD	CARDHOLDER INITIALS	DATE RETURNED