



AMAZON CHARGE

Date of Purchase: _____ Name: _____

For Purchase of: _____

Account Code: ____ - ____ - ____ - ____ - ____ - ____ Total Charged: _____

****Attach Detailed Receipt***

Staff Signature: _____ Date: _____

Building/Program Approval: _____ Date: _____

Important Reminders:

- The District Amazon Charging account is prohibited from use for personal expenses.
- Failure to provide a detailed receipt may result in charges on Amazon being denied and then charged to employees and may also result in loss of Amazon charging permissions.

This completed form, with attached documentation, is due to the Finance Department within four (4) days of the incurred charge.