Approval Date:

204 Woods Hall Phone: 314.516.6685

Fax: 314.516.5786

email: sabusiness@umsl.edu

ONECARD Expense Report Authorization Form

Receipts with MOCODE(s) and PS Account(s), and a detailed business purpose for each transaction must be attached and entered on the Expense Report.

Date of Request:	
Cardholder's Name:	
Cardholder's Signature:	
Total receipts of One Card	
transactions (must match	
One Card Expense Report)	
Total amount of One Card	
transactions (must match	
One Card Expense Report)	
	Authorized Supervisor Approval
Signature of Approver:	
Printed Name of Approver:	