LEON COUNTY SCHOOLS

LCS 9830 – 1296
Revised 4/16/2025

# INTERNAL ACCOUNT PURCHASING CARD TRANSACTION LOG

BOOKKEEPER/CARDHOLDER NAME

COST CENTER NAME

PHONE NUMBER

MONTH / YEAR

SITE NAME

| ORDER DATE | VENDOR | DESCRIPTION OF PURCHASE | TOTAL COST | CODING | | | | | | SBAA CK # |
|---|---|---|---|---|---|---|---|---|---|---|
| | | | | FUND / TYPE / FUNC | OBJ | CTR | PROJ | SUB PRJT | PGM | |
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