**Departmental Charge Authorization**

**DATE:** ____________________  **CONTACT NAME:** Chad Lafferty

**DEPARTMENT:** Information Resources and Technology

**DESCRIPTION (CHECK ONE)***

- [ ] BARNES & NOBLE
- [ ] CENTRAL STORES
- [X] OTHER

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**DEBIT DEPARTMENT (CHARGE TO)**

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**CREDIT DEPARTMENT**

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**DEBIT DEPARTMENT APPROVAL (REQUIRED)**

**DEPT HEAD NAME (PRINT):**

**DEPT HEAD SIGNATURE:**

**DATE RECEIVED (IF APPLICABLE):**

**CREDIT DEPARTMENT APPROVAL (REQUIRED)**

**DEPT HEAD NAME (PRINT):**

**DEPT HEAD SIGNATURE:**

**DATE RECEIVED:**

**BUDGET OFFICER APPROVAL:**

- Supporting documentation is required with this form.
- See Departmental Charge Authorization Procedures located at DCA Procedures on the Accounting Services Office website.
- Only fully completed and signed forms will be processed.

Revised 4/17/2017