FM CREDIT CARD CERTIFICATION FORM

I certify that I have received the services or materials billed on the PAWG credit card for the month of

Statement Month **DATE**

Cardholder Name
(Please Print)

Cardholder Signature

or send an emiail statement certifing that I have received the services or materials billed on the PAWG credit card for the month of

VENDOR NAME	DESCRIPTION	DEPARTMENT TO BE CHARGED	AMOUNT

TOTAL CHARGES: