

***This form must be printed on departmental letterhead.***

Date \_\_\_\_\_

Vendor \_\_\_\_\_

To Whom It May Concern:

I have authorized \_\_\_\_\_ to use my

University of Alaska Commercial MasterCard to purchase \_\_\_\_\_

\_\_\_\_\_.

This purchase shall not exceed \$ \_\_\_\_\_ without my prior verbal authorization. You can contact me at \_\_\_\_\_ for verification, questions, or additional purchase limit authorization.

Thank you for your help and assistance in this matter.

Sincerely,

University of Alaska

Name

Title

**Place individuals Polar Express  
Card here prior to copying letter.**