Gift Card Form

Purchaser Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**The Purchase and use of gift cards should be avoided when possible. If they are used, the following must be followed:**

**- Prior written approval from a Principal or Director.**

**- The amount per card is limited to $50.00**

**- The user must provide a written log to indicate what the card was used for. This completed document must be submitted with cheque request voucher.**

**- Gift cards are not to be used for financial gain for staff/employees. Consideration should be made on type of gift card purchased. ie. No NSLC gift cards**

**Date: ­­­­­­­­­­­­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Reason for Gift Card Purchase: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Purchaser Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Principal Approval: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**FORM MUST BE FILLED OUT FULLY. PAYMENTS CANNOT BE MADE WITHOUT THEM!**

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| **Business Name** | **Gift Card Amount** | **Receiver Name** | **Receiver Signature** |
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**\*Attach Invoices/Receipts**