



The College at
BROCKPORT
 STATE UNIVERSITY OF NEW YORK



CITIBANK VISA PROCUREMENT CARD CREDIT PENDING FORM

INITIAL COMMUNICATIONS: _____

VENDOR NAME: _____

DATE: _____ CONTACT: _____

REASON FOR CREDIT: _____

EXPECTED OUTCOME: _____

FOLLOW-UP COMMUNICATIONS: _____

DATE: _____ CONTACT: _____

EXPECTED OUTCOME: _____

If a problem cannot be resolved directly with the vendor by the cardholder within a reasonable timeframe (minimum one full billing cycle), please contact the Program Administrator for assistance and fax the completed form to 395-5885 or email: dnapier@brockport.edu

NOTE: This is an official document of procurement record and must be maintained for audit purposes.