



## Subrecipient Gift Card/Voucher Prior Approval Request Form

Subrecipient Name:	Date of Request:
Subaward # (DHEC internal #)	
Subaward Period of Performance (grant year):	
Funding Source:	
Vendor name on gift card/voucher:	
Number of gift card/vouchers requested:	Value of each gift card/voucher:
Total purchase price:	
Reason for purchase:	
Number of previously issued gift cards/vouchers on hand:	
Months covered in this request (3-month maximum):	

Gift card/voucher info:

Who will be the clients/target recipients of the cards/vouchers?

Method of distribution:

Description of gift card/voucher tracking:

Additional information relevant to this request:

**Please attach relevant documentation to this request such as Federal award information, Notice of Award, emails pertaining to incentive approvals from the Federal award contact, etc.**

Authorized Subrecipient Requestor (Print Name) \_\_\_\_\_

Authorized Subrecipient Requestor Signature \_\_\_\_\_ Date \_\_\_\_\_

Authorized Subrecipient Supervisor (Print Name) \_\_\_\_\_

Authorized Subrecipient Supervisor Signature \_\_\_\_\_ Date \_\_\_\_\_

**INTERNAL DHEC USE ONLY:**

Program Area Approver (Print Name) \_\_\_\_\_

Program Area Approver Signature \_\_\_\_\_ Date \_\_\_\_\_

Grant Compliance Approver (Print Name) \_\_\_\_\_

Grant Compliance Signature \_\_\_\_\_ Date \_\_\_\_\_