

Cardholder Information

Cardholder Name: _____
 Department: _____ Budget Code(s): _____
 Last Six Digits of PCard Account Number: _____

Purchase Information

Vendor Name: _____ Date of charge: _____

Item Description	Amount (\$)	Notes
1.		
2.		
3.		
4.		
Receipt Total		\$

Reason you are unable to provide receipt document: _____

I certify by my signature below that the above goods/services were purchased with the PCard in my name and the goods/services were for official University business. I also certify that I have included this purchase on my log for the month in which the charge occurred.

Cardholder's Signature

Date

Supervisor's Approving Signature

Date