

Purchasing Card Receipt Form

This electronic form has been designed to allow you to input all available information, including any available receipts and additional justification/approval for this charge, on a single page.

The following information is required for auditing purposes:

CARDHOLDER: _____

VENDOR: _____

FUNDING SOURCE:

Receipt Total: _____

Dept. ID	Fund	Program	Source	Budget Ref.	Project #	Flex Code	UFID	CRIS	Amount
Total Funding Assigned:									

Service Vehicle #: _____ Boat Registration #: _____

Please list the item(s) purchased (most expensive to least expensive):

Using layman's terms/avoiding jargon, how does this purchase directly benefit the funding source? Please be as detailed as necessary to assist with audit research:

Cardholder Signature:

Funding Signature 1

Funding Signature 2

Funding Signature 3

Office Use Only:

PI/Staff: _____

Billing Date: _____

Account Code _____

TA# _____

ER# _____

RA# _____

Voucher# _____

Verified: _____ Date: _____

Approved: _____ Date: _____

(+grant): _____ Date: _____

Downloaded:

Attach Backup Documents
(Receipts/Justification/Approvals)

Submit for Processing