

# 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
<b>Total Funding Assigned:</b>									

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