

Purchasing Card Receipt Form

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- INSTRUCTIONS:**
1. Fill out **ALL** applicable sections of this form. Incomplete forms will be rejected.
 2. Please **PAPER CLIP** an **ITEMIZED RECEIPT** to this form. **PLEASE DO NOT TAPE.**
 3. **DO NOT FORGET TO SIGN YOUR RECEIPTS.**

CARD HOLDER

Purchasing Card Holder's Name: _____

Purchasing Card Holder's Signature: _____

Person Requesting Purchase*: _____

***IF DIFFERENT** from Purchasing Card Holder

PURCHASE

Date of Purchase: _____ Total amount of Purchase: _____

Vendor: _____

Item(s) Purchased: _____

FUNDING OF PURCHASE

Project to be Charged: _____

Budget Authority Signature: _____ Date Approved: _____

Is this purchase associated with **travel**? ___ Yes ___ No.

If so, then was a Travel Authorization submitted? ___ Yes ___ No.

Purchase Justification (if applicable):

Finance Office Use Only:

Travel Authorization #: _____ Approved By: _____

Account: _____ Date Reconciled: _____