Indiana University of Pennsylvania

# Purchasing Card Missing Receipt Form

I, , have \_\_\_\_\_\_\_not received (check one)

 \_\_\_\_\_\_ have misplaced

a Purchasing Card receipt, i.e., merchant sales slip.

This form is submitted in lieu of the original receipt:

|  |  |
| --- | --- |
| Cardholder Name: |  |
| Card Number (last 4 digits only): |  |
| Department: |  |
| Date of Transaction: |  |
| Vendor Name: |  |
|  |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| # | Item Purchased and Purpose | Quantity | Unit Price | Amount |
| 1 |  |  |  |  |
| 2 |  |  |  |  |
| 3 |  |  |  |  |
| 4 |  |  |  |  |
| 5 |  |  |  |  |
| 6 |  |  |  |  |
| 7 |  |  |  |  |
| 8 |  |  |  |  |
| 9 |  |  |  |  |
| 10 |  |  |  |  |
|  |  |  | Total | $ |

I certify that the amounts shown above were expended for IUP business purposes:

Cardholder signature: Date:

Supervisor/Financial Mgr Signature: Date:

One form must be filled out for **EACH** missing receipt. Submit this form with your other receipts and your transaction log.