

# PCard Missing Receipt Form

This form is to be used as documentation for missing PCard receipts *ONLY* if the merchant cannot produce duplicate documentation. It is allowed only as a rare circumstance. The form is to be completed by the Cardholder and must be signed by the Cardholder, Departmental PCard Liaison and Department Head. **Repeated use of this form as a substitute for a receipt may result in suspension or cancellation of the PCard.**

Cardholder Name or Department Card Name: \_\_\_\_\_

Trans ID# \_\_\_\_\_ eDoc # \_\_\_\_\_ Transaction Amount: \_\_\_\_\_

Post Date: \_\_\_\_\_ Merchant Name: \_\_\_\_\_

Contact Name (person using PCard if Department Card): \_\_\_\_\_

Why is the receipt missing?

What attempts have been made to request a duplicate receipt from the merchant? (Please include names, dates, phone numbers or emails used in requesting documentation from the merchant.)

**Itemize the Purchase:**

Description of Item	Cost of Item	Tax Paid
Total		

**Business Purpose – Please provide detailed University business purpose for the purchase:**

Cardholder Signature \_\_\_\_\_ Date \_\_\_\_\_

*By signing this form, I validate that the above listed item(s) were purchased and that every attempt was made to obtain an itemized receipt from the merchant.*

Liaison Signature \_\_\_\_\_ Date \_\_\_\_\_

Department Head Signature \_\_\_\_\_ Date \_\_\_\_\_