

University of Arkansas Form for Lost/Unobtainable Procurement Card Receipt

RECEIPT/DOCUMENT NUMBER (Displayed on EIC): _____

DATE OF PURCHASE: _____

MERCHANT NAME: _____

CARDHOLDER NAME: _____

DESCRIPTION OF PURCHASE: _____

TOTAL PURCHASE AMOUNT: _____

RECEIPT WAS (CHECK ONE) _____ LOST _____ NOT OBTAINABLE

PLEASE PROVIDE BRIEF EXPLANATION OF WHY RECEIPT WAS NOT OBTAINABLE: _____

I, _____, the undersigned do certify that the above purchase was made for University of Arkansas business.

CARDHOLDER SIGNATURE

DATE

DEPARTMENT HEAD SIGNATURE

DATE