

## CAL-CARD MISSING RECEIPT FORM

Date of Purchase: \_\_\_\_\_

Vendor Name: \_\_\_\_\_

Reason you were unable to obtain detailed receipt/invoice:

\_\_\_\_\_

Description of Service:

(If meal receipt, indicate which meal & list individual(s) the receipt covers.)

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Dollar Amount: \_\_\_\_\_

**The Purchasing Card is a convenience for the user. Failure to follow the Cal Card Procedures outlined in the handbook can result in revocation of your Purchasing Card. Goods/Services obtained with the Purchasing Card are auditable expenditures. If proper documentation is not obtained, the cardholder may be held responsible for the expense.**

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

Approving Officer Signature: \_\_\_\_\_ Date: \_\_\_\_\_