

FSHN P-CARD RECEIPT FORM

Instructions:

- Please use a separate form for each transaction.
- Attach the related back-up to this form, such as your itemized receipt, packing slip, and / or invoice.
- To reduce costs and streamline our processes, we no longer accept paper forms. This form along with the back-up needs to be submitted electronically to FSHN-Admin@ifas.ufl.edu. Keep the original paperwork for your personal records and the monthly reconciliation of your P-card Aging Report.

P-card Holder's Information

P-card Holder's Name:

P-card Holder's Signature:

Transaction Information

Complete the fields below.

Vendor's Name:

Description of Purchase:
(Use layman's terms so that we can properly code items.)

Transaction Amount (USD):

Foreign Currency Amount:
(as it appears on receipt)

Account to Charge:

If this expense was incurred during travel, please provide the traveler's name and related TA or ER #. If you purchased fuel for one of the Department's vehicles or a rental vehicle, then include the Vehicle # or Rental Agreement # below if you have it available.

Traveler's Name:

TA or ER #: UF

Vehicle #:

Rental Agreement #:

Internal Office Use Below:

Posted to fiscal spreadsheets

Administrative Services Manager Signature

NOTES:

Voucher #:

Account Code:

Created 10/5/20