

P-CARD EXPENSE CERTIFICATION FORM

(For use when an invoice cannot be obtained)

Cardholder:

Department:

Date of Purchase	Vendor	Amount	Description
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

I certify that it was not possible to obtain an invoice related to the P-Card expenditure noted above.

Cardholder's Name (Printed)

Cardholder's Signature

Date

Fiscal Officer's Name (Printed)

Fiscal Officer's Signature

Date

THIS FORM IS TO BE USED ONLY WHEN ALL EFFORTS TO OBTAIN AN INVOICE HAVE BEEN EXHAUSTED.

Retain this signed form with the corresponding P-Card Statement.