MISSOURI STATE UNIVERSITY
CARDHOLDER PROCUREMENT CARD TRANSACTION LOG

Purchase Date	Requested By	Vendor Name	Description of Items Purchased	Total Purchase Amount	Backup Documen-tation* Received Yes (Y) or No (N)	Order Received Complete (C) or Partial (P)	Date Received
			TOTAL PURCHASE AMOUNT				

APPROVAL

I certify that the above data is complete and correct in accordance with all University and department payment and purchasing regulations.

Cardholder Name	Signature

I certify that I have audited the above transaction log and the charges appear to be in accordance with all University and department payment and purchasing regulations.

Department Procurement Card Coordinator	Signature

*Backup documentation consists of credit card slips, cash register receipts, sales receipts, packing slips, etc.