



University of Arkansas Form for Lost/Unobtainable Procurement Card Receipt

WORKDAY VERIFICATION NUMBER (PC/ER#): \_\_\_\_\_

CARDHOLDER NAME: \_\_\_\_\_ DATE OF PURCHASE: \_\_\_\_\_

MERCHANT 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

\_\_\_\_\_  
DEPARTMENT HEAD SIGNATURE

\_\_\_\_\_  
DATE

\_\_\_\_\_  
DATE

Cardholder and Department Head are the same individual.