

University of Arkansas Form for Lost/Unobtainable Travel Card Receipt

RECEIPT/DOCUMENT NUMBER (Displayed on EIC): _____

TRAVEL AUTHORIZATION NUMBER: _____

DATE OF PURCHASE: _____

MERCHANT NAME: _____

CARDHOLDER 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 travel.

CARDHOLDER SIGNATURE

DATE

DEPARTMENT HEAD SIGNATURE

DATE