**University of Colorado Boulder Department of Psychology & Neuroscience**

***PCard Purchase Receipt Form***

Date to Business Office: Cardholder Name:

Vendor: Purchase Date:

Speedtype(s): Amount:

Amount:

# \*\* Please attach one itemized receipt per form\*\*

**Email form & receipt to your Business Office contact professional**

**Brief Description –** please explain **what** was purchased:

**Business Purpose –** please explain **how** this benefits official University business:

***For official functions:***

1. people or less, please list all attendee’s names & affiliations
2. people or more, please list groups of attendees (i.e. 5 faculty, 5 staff, 10 students, etc.)

Revision Date: 04/2017