



P-Card Transaction Form

This form must be completed for all P-Card Transactions to provide full details of the purchase.
It supersedes all other previous forms.

Name of Cardholder (or Person Requesting the Purchase)			
Date of Purchase			
Vendor			
Detailed Purchase Justification			
Budget Code			
Item Description *List out every line item on the receipt. Total item price must match each line item charge*	Quantity	Unit Price	Total Item Price
Sales Tax Applied by Vendor ☐ Use Tax Needs to be Applied ☐ Tax Charge Not Applicable ☐	1	-----	
Total Amount Above (must match receipt total)			
Sign to certify receipt of the goods purchased for District use.	Signature:		Date: