

TAPE RECEIPT ON BACK

Ross Pike County Educational Service District  
Credit Card Expenditure Form

CARD#

This form is to be completed after each credit card transaction in the name of Ross Pike County Educational Service District. Attach receipt to form.

Name of Credit Card User: \_\_\_\_\_

Date of Transaction: \_\_\_\_\_

Vendor: (Circle)      Wal-Mart      Kmart      MASTER CARD

List of Items Purchased: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Purpose of Purchase: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Cost of Purchase: \$ \_\_\_\_\_ Purchase Order: # \_\_\_\_\_

I verify the purchased were made on an approved purchase and no purchases made were personal or will be for personal use.

\_\_\_\_\_  
Signature of Credit Card User

\_\_\_\_\_  
Date

Reviewed:

\_\_\_\_\_  
Signature of Supervisor

\_\_\_\_\_  
Date