



## COMMERCIAL CARD – MISSING RECEIPT

College of Eastern Idaho · Business Office · 1600 S 25<sup>th</sup> E · Idaho Falls, ID 83404  
Card Administrator – Hope Noe · [hope.noe@cei.edu](mailto:hope.noe@cei.edu) · 208-535-5315

### Cardholder Information – Please print clearly

Cardholder Name: \_\_\_\_\_ Department: \_\_\_\_\_

### Transaction Record

Card Statement Date: \_\_\_\_\_

Merchant Name: \_\_\_\_\_

Items Purchased	Amount
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
Total	\$ _____

Reason receipt is not available:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

### Signatures

Cardholder Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Department Supervisor: \_\_\_\_\_ Date: \_\_\_\_\_

Business Office Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Attach Original to Statement for Reconciliation. Send Copy to the Card Administrator**

### To be completed by Card Administrator

Additional Notes:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Card Administrator Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Please return completed form to the Business Office**