

**West Texas A&M University**  
**Procurement Card**  
**Supplemental Documentation/Missing Receipts Form**

Date \_\_\_\_\_

Cardholder Name \_\_\_\_\_

Department \_\_\_\_\_

Please complete all sections, and add to the . Please attach any documentation from the vendor/merchant. This form is to be used only as additional documentation when:  
(Please Check reason)\*

- Vendor does not provide invoices or receipts, attach vendor documents (required. Explain \* \_\_\_\_\_
- Original invoice or receipt is incorrect. (List payment and explain reason for change\* \_\_\_\_\_
- Receipts not available (Explain why receipt not available)\* \_\_\_\_\_
- Other (Explain below)\* \_\_\_\_\_

Vendor Name \_\_\_\_\_

Vendor Address \_\_\_\_\_

Vendor City \_\_\_\_\_ Vendor State \_\_\_\_\_ Vendor Zip \_\_\_\_\_

Vendor Telephone # \_\_\_\_\_

Date of Purchase \_\_\_\_\_ Amount of Purchase \_\_\_\_\_

Description of Goods/Service \_\_\_\_\_  
\_\_\_\_\_

Name of Person Completing Form \_\_\_\_\_ Phone# \_\_\_\_\_

Card Holder Signature \_\_\_\_\_

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