

**University of Florida
Florida Cooperative Fish & Wildlife Research Unit**

Purchasing Card (Visa) Replacement Receipt Form

CARDHOLDER NAME: _____

I, the undersigned, do certify that the below mentioned purchase was made for official State business.

Cardholder Signature

Date Signed

DATE OF PURCHASE: _____

VENDOR: _____

DESCRIPTION OF PURCHASE:

AMOUNT OF PURCHASE: _____

PROJECT TO BE CHARGED: _____

TRAVEL AUTHORIZATION # (TA): _____

UF VEHICLE #: _____

Florida CRU Office Use Only:

Approved By: _____ Date Posted: _____ Date Reconciled: _____