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| --- |
| **Pcard or T&E Card Receipts****(Note:  Please include itemized receipts)** |
| **Please indicate if receipts are for****Pcard or T&E Card:** |  |
| **P-Card/T&E Card Holder:** |  |
| **CFS (or account name):** |  |
| **Purpose/Description:** |  |
| **Are any expenses for meals?****-If yes, did fewer than 8 people attend?****-If yes, please provide names of attendees.** |  |
|  |  |