American University Club Sports
Credit Card Receipt Form

This form must be submitted the first business day after return. All receipts must be submitted along with the card.

Date:_____ Club:_____

Date	Description		Price
		Total	

Attach receipts taped to a sheet of paper.

Reason for Purchase:_____

_____

_____

_____ _____ _____

Club Treasurer Signature Name Date

Office Use Only

_____

Director Club Sports Date

Budget Account Number: 11-520710-_____

Entered Into Tracking: _____

Reconciled in Mastercard: _____