Dalton State College
Detailed Receipt Information

Name:_____

Last Four Digits of P-Card:_____

Date of Transaction:_____

Merchant Name:_____

Description of Purchase:_____

For:_____

Item / Service each by Total (include number participants):

_____

_____

_____

_____

_____

_____

_____

_____

I certify that the amounts shown above were expensed for Dalton State College business purposes. If charged to a grant or project, I certify that the expenses comply with the conditions of the grant or project.

_____ Date: _____
Cardholder's Signature

_____ Date: _____
Department Chairman/Manager/Administrator

Department Name: _____

Effective Date: December 7, 2007