Purchasing Card Transaction Log

Month Of _____

Cardholder Name:	Division/ Department:
Card Number:	Phone:
Cost Center:	Manager's Name:

#	Date	Merchant	Description Of Purchase, e.g. Office Supplies	Subtotal	Freight	Other	Total	Note
1								
2								
3								
4								
5								
6								
7								
8								
9								
10								
11								
12								
13								
14								
15								
16								
17								
Log Total								
Statement Total								

Cardholder Signature & Date _____ Managers Signature & Date _____