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## e-Crow (Electronic Card Reconciliation On Web)

e-CROW Version 4.02 Production DECD

**Purchase Card Summary Of Expenditure**

**Embossed Name** TONY HARRISON  
**Card Type:** ANZV  
**Card Number:** 471514992211XXXX  
**User Name:** Sarah Horner  
**Supervisor:** Audra Cooper  
**Billing Date:** 02/04/14

**Requested By:** Sarah Horner  
**Printed On:** 14 Apr, 2014 11:07:30

Date	Bill Number	Supplier	GL Account / Job Cost	User Ref	Amount GST Inclusive	Tax Code	Tax Amount
03/03/14	1412710847001549	ADELAIDE CONVENTION	007731827015		13.20	D10	1.20
Car parking for official event							
04/03/14	1412710847001550	ADELAIDE CONVENTION	007731827015		13.20	D10	1.20
car parking for official event							
27/03/14	1412710847001551	TAXI EPAY	007731237015		29.92	D10	2.72
Taxi transport while interstate							
28/03/14	1412710847001552	AERIAL TRANSPORT	007731237015		9.83	D10	0.89
Taxi transport while interstate							
28/03/14	1412710847001553	AERIAL TRANSPORT	007731237015		27.59	D10	2.51
Taxi transport while interstate							
28/03/14	1412710847001554	Hyatt Hotel Canberra	007731217015		104.75	D10	9.52
Meal expenses while interstate on official business							
28/03/14	1412710847001555	Hyatt Hotel Canberra	007731217015		39.59	D10	3.60
Breakfast for official function							
28/03/14	1412710847001556	SUBURBAN TAXI 131008	007731237015		32.86	D10	2.99
taxi transport while interstate							
		TOTAL OF STATEMENT			270.94		24.63

**I certify that all charges against my purchase card for this statement are for official business purposes only, are accounted for in accordance with the Agency Purchase Card Guidelines and that I have attached documentation that supports all of these transactions listed on this Purchase Card Summary of Expenditure.**

**Certified Correct - User Name:** ..... **Date:** .....

**I have reviewed the transactions and supporting documentation contained on this Purchase Card Summary of Expenditure and I am satisfied that all purchases are for official business purposes and processed in accordance with Agency Purchase Card Guidelines.**

**Authorisation of Supervisor:** ..... **Date:** .....