

Timeframe: Date Range: 11/05/2019 - 11/05/2019 **Employee ID:** Employee:All Employees **Amount and Cardholder:** Amount: Cardholder: Last 4: **Display Options:** Trans ID Invoice ID Date/Time Cardholder Last 4 Issuer Auth Code Batched Employee Online/Offline Base Amt Tip Amt Total Sort By:Trans ID Profit Center:All Profit Centers