



PURCHASING CARD MISSING RECEIPT FORM

This form is to be used only if the original receipt is missing. Please fill out and retain with your expense report as the receipt. It must be **filled in completely and signed** by your Supervisor.

Transaction date: _____

Vendor: _____

Amount: _____

Description of Purchase (including purpose): _____

Date Order Placed: _____

Reason for Missing Receipt, Invoice, or Legitimate proof of purchase: _____

I hereby certify that all items purchased are for the discharge of University business and the amounts claimed are correct and proper charges allowed by University policy. I also certify that to the best of my knowledge, the cardholder has not and will not be reimbursed, for any of these expenses, from any other source.

Supervisor Signature: _____

Date: _____

Cardholder Signature: _____

Date: _____