

## Missing Receipt Form

Receipts to substantiate purchase card transactions and requests for reimbursement through accounts payable are required. In addition, reimbursement requests must be submitted within 30 days of incurring the expense.

This form is to be used when an original receipt is not available to attach to the P-card statement or reimbursement request. **Purchaser should make every attempt to obtain a receipt before using this form.**

Accounts Payable

Purchase Card

**Warning: Repeated use of this form as substitute documentation could result in revocation of your P-Card and Accounts Payable reimbursement.** More than two P-Card violations within six months may suspend your card indefinitely.

Vendor: \_\_\_\_\_

Vendor Address: \_\_\_\_\_

Date of Purchase: \_\_\_\_\_ Purchase Amount: \$ \_\_\_\_\_

Items Purchased: \_\_\_\_\_

Business Purpose: \_\_\_\_\_

Reason receipt is not available: \_\_\_\_\_

Explain the action steps taken to obtain a duplicate receipt: \_\_\_\_\_

**As the Purchaser, by signing my name below I certify the following:**

1. This purchase was made for official College business.
2. I am aware the College requires original receipts for this purchase and, by completing this form, I acknowledge that I am in violation of College policy.
3. If this purchase was made on the College P-Card, the card may be suspended or cancelled for not providing original receipts.
4. No reimbursement of this expense has been or will be sought or accepted from any other source.

**Please attach this form to your payment request or P-card statement along with a copy of official documentation which certifies the transaction occurred (i.e. personal credit card statement or cancelled check). If not required to send to the Business Office, keep this form in your files for a minimum of 18 months.**

\_\_\_\_\_  
**Print Purchaser Name**

\_\_\_\_\_  
**Signature of Purchaser**

\_\_\_\_\_  
**Date**