AFFIDAVIT OF LOST OR UNAVAILABLE RECEIPT



Instructions

All information requested on this form needs to be completed before it will be accepted.

Please Print or Type		
Name	Name of Vendor	City
Date of Receipt	Total Cost	Vendors Telephone Number
Reason for Missing Original Receipt Description of Expense		
Form of Payment		
Cash	Credit Card (Attach Credit Card Slip)	☐ Check
documenting payment. I am submitti	incurred the expense described above. I have lost, ing this affidavit in lieu of the missing receipt. r a cost incurred while on official university business this expense.	
	SUPERVISOR APPROVAL	
Signature of Supervisor		Date
Print Supervisor Name		
This form may not be used for the foll 1.) Airline tickets 2.) Car rental receipts 3.) Lodging receipts 4.) Registration receipts / br	lowing as duplicate receipts may be obtained for the ochures	ese expenses.
For Business and Financial Service Approved	es Purposes Only Declined	
Reason		
BFS Signature		