

MISSING RECEIPT AFFIDAVIT
For use with Comdata MasterCard Purchasing Program

I, _____ have either misplaced or not received a receipt for a Purchasing Card purchase.

This form is submitted in lieu of the original receipt.

Vendor Name: _____

Transaction Date: _____ Amount: \$ _____

Items Purchased: _____

Reason Purchased: _____

I certify that the goods shown above were purchased for Lawrence University business purposes as outlined in the policies and procedures for purchasing card use.

Cardholder signature: _____ Date: _____

Department Manager signature: _____ Date: _____