MISSING RECEIPT AFFIDAVIT
(for use with Purchasing Card or Travel Card transactions)

I, _______________________, have either not received, or have misplaced a receipt totaling ____________________. This expense was incurred on behalf of Miami University.

Reference Number: _____________________________ Transaction Date: _______________
(for purchasing card transaction)

Vendor:________________________________________________________________________

Date expense incurred _______________________

Reason for missing receipt __________________________________________________________

Detail of Expense (type or print in box below)

I certify that the detail and amount shown above was expended for Miami University business purposes. If charged to a grant or contract, I certify that the claimed expenses comply with the conditions of the grant or contract.

__________________________  ______________________________
Cardholder/Traveler Signature       Date

________________________________________
Department Administrator/Chair for Purchasing Card or Authorized Signer for Travel

____________________________
Printed Name of Department Administrator/Chair For Purchasing Card or Authorized Signer for Travel