Missing Receipt Affidavit  
(for use with purchasing card or travel expense transactions)

I, ____________________________, have either not received, or have misplaced a receipt totaling _____________. This expense was incurred on behalf of Tulane University.

This form is submitted in lieu of the original receipt.

Reference Number: ______________________________________ Transaction Date: ____________

Vendor: __________________________________________________________

Detail of Expense  
(type in box below)

I certify that the amounts shown above were expended for Tulane 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

_______________________________________   __________________  
Signature of Department Administrator/Chair for Purchasing Card, or Authorized Signer for Travel   Date

_______________________________________   __________________  
Printed Name of Department Administrator/Chair   For Purchasing Card, or Authorized Signer for Travel
Missing Receipt Affidavit

Instructions

If there is a blue dotted line surrounding a field name or column heading, you can click there to access a link table that contains a list of values relevant to that field or column. Once you decide on the correct value, you can "copy" it from the table by highlighting it and pressing <Ctrl><C>, and then return to the form and “paste” it into the correct field by clicking in the field and pressing <Ctrl><V>. You can also return to the form and type it in from memory. To return to the form from the link table, press the Back button at the top left hand corner of the screen.

Complete the Missing Receipt Affidavit form by entering data into the following fields or regions:

1. Print the requestor’s name
2. Include the total amount of the missing receipt
3. Reference Number:
4. **Transaction Date:** Enter the date the transaction took place
5. **Vendor:** Enter the name of the vendor associated with the missing receipt
6. **Amount:** Enter the total amount of the missing receipt
7. **Detail of Expense:** Supply as many details as possible regarding the missing receipt (i.e. if the receipt was lost or not received, details of what services or goods were received etc.)
8. **Cardholder/Traveler Signature:** The signature of the purchasing card holder, or the traveler
9. **Date:** The date of the signature
10. **Signature of Department Administrator/Chair for Purchasing Card, or Authorized Signer for Travel:**
11. **Date:** Enter the date reviewed and approved by the Department Administrator/Chair for Purchasing Card, or Authorized Signer for Travel
12. **Printed Name of Department Administrator/Chair for Purchasing Card, or Authorized Signer for Travel:** Print the name of the Department Administrator/Chair for Purchasing Card, or Authorized Signer for Travel

Forward the completed form to the appropriate office (see Policy).