

Missing Receipt Affidavit

INSTRUCTIONS

This completed form must be attached to its corresponding U.S. Bank transaction ONLY when original, itemized receipts are lost, and a duplicate cannot be obtained from the merchant.

RECEIPT INFORMATION

Date Paid	
Amount Paid	
Vendor Name	
Vendor City & State	
Item Description	
Statement of reason for missing receipt	

ATTESTATION

I acknowledge that this charge to my P-Card is a legitimate University expense incurred for the benefit of SCSU and is an allowable expense as defined in the SCSU P-Card Manual. I further certify that one or more receipts related to this expense are no longer available or obtainable. I understand that I may not submit a Missing Receipt Affidavit on a routine basis, and that excessive use of this form may result in infractions against my P-Card privileges.

Accountholder Signature & Date	
Budget Authority Signature & Date	
Vice President or Dean Signature & Date	

For questions, please contact **Robin Kenefick**  (203) 392-5266  kenefickr1@southernct.edu.