Slippery Rock University of Pennsylvania
Missing Receipt Form
Purchasing Card/Travel Related Receipts

I, ________________________, have either not received or have misplaced a Purchasing Card receipt, a merchant sales slip, or a travel related receipt.

This form is submitted in lieu of the original receipt.

Card Holder/Traveler ____

Card Number (last 4-digits)/Traveler Trip Number______________________________

Department: ____

Date of Transaction: ____

Vendor Name: ____

#	Item Purchased & Purpose	Quantity	Unit Price	Total Amount

I certify that the amounts shown above were expended for Slippery Rock University business purposes.

Card Holder/Travelers Signature: ___________________________Date: __________________

Dean/Chair/Director Signature: ___________________________Date: __________________

Purchasing Card Holders: One form must be filled out for EACH missing receipt.
Submit this form with your other receipts and your transaction log within five business days of receipt of your monthly statement.
Travelers: May be reimbursed up to $35.00 without a receipt, excluding airfare, food, and hotel. This form must be completed and attached to the travel expense report if seeking this reimbursement. Only one exception is available per trip.