

Lost / Missing Receipt / Invoice Verification Form

Purcha	ser Name: _			_		
Department:				Email:		
Foundation Project Number:				Object Code:		
P-Card	Statement E	Billing Period	d:		<u></u>	
Invoice	or Referenc	e Number (i	f any):			
<u>Verific</u>	cation of i	tems rec	eived			
Vendor Name:				Date of Purchase:		
Purcha	se Amount (\$):		_		
	Item No.	Qty	Description with	n Price per unit	Price	
				Subtotal	\$	
				Sales Tax		
				Shipping/Handling		
				TOTAL	\$	
Origina	l Receipt wa	s:	Lost	Never Receiv	ved	
Reaso	on(s) item	ized invo	ice/receipt wa	as not obtained fo	or this order:	
			<u> </u>			
the orig	inal itemized	d receipt is r	•	m not claiming reimbu	btain a duplicate receipt, rsement from any other	
Purchaser Signature			 Date			
			<u></u>			
Authorized Project Signer Name A				al Signature	Date	