

**SECTION 9: APPENDIX E**

**Purchasing Card Missing Receipt Affidavit**

Cardholder Name: \_\_\_\_\_

Date of Purchase: \_\_\_\_\_

Vendor Name: \_\_\_\_\_

Amount of Purchase: \_\_\_\_\_

Detailed item description and cost reflected on missing document: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

I certify the above mentioned receipt/invoice is missing. The original receipt/invoice was lost or not obtained. I was unable to obtain it from the provider of goods or services for which payment was made. I certify the expense was incurred in connection with City business and I understand that the falsification of this document constitutes an act of fraud. I understand that a Missing Receipt/Invoice Affidavit should be used on rare occasions and may not be used on a routine basis. I further understand that repeated use of this document may revoke the privilege of providing a declaration in lieu of a receipt/invoice. I certify that the amount shown is the amount I actually paid, that I have not and will not submit a duplicate claim, and that I have not and will not seek a claim for these expenses from any other source.

Cardholder Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Print Name: \_\_\_\_\_

Department Director Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Print Name: \_\_\_\_\_

Purchasing Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Print Name: \_\_\_\_\_

Finance Director Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Print Name: \_\_\_\_\_