

Montrose County



School District

Purchasing Card - Missing Receipt Form

I, _____ have either misplaced or not received a Purchasing Card
Receipt totaling \$_____.

I have made an attempt to obtain a duplicate copy without success. This form is submitted in lieu of the original receipt. If "lost" receipt is for a meal please note individual names and business purpose.

Purchasing Card Account Number: _____

Name on the Card: _____

School or Department : _____

Vendor : _____ Transaction Date: _____

Expenditure Acct. # _____

Items Purchased	Amount

I certify that the original receipt was lost, accidently destroyed or unobtainable and that the information and amount (s) shown above is complete and expended for the District's business purposes.

Employee's Signature Date: _____

Signature of Principal/Director authorizing expenditure Date: _____