



MISSING RECEIPT AFFIDAVIT

**Purpose – To be utilized as backup when receipts are missing
(Use as backup, when necessary for Forms AP-1, AP-2, AP-3 and AP-4)
(Please retain a copy for your records)**

Please print or type:

I certify that each ticket stub or other receipt described below, which has been reported on Expense Report Form _____ dated from _____ to _____ for _____

was lost or not obtained and that I have been unable to obtain a duplicate from the provider of goods or services for which payment was made. It has not yet been nor will it be submitted in the future for reimbursement to Cambridge College or any other organization.

Detailed Description of Missing Receipt(s)

Amount

Date

Requestor Signature

Date

Authorized Signer