Missing Receipts Claim Form

Please return form signed by yourself and your budget director or p-card approver to the Controller's Office, MSC 167.

Date: ______________

I, ________________________________, have either (please check one):

☐ Not Received        ☐ Misplaced

Receipt(s) totaling $__________.

Check one of the boxes below:

☐ The purchase was made with my P-card.

☐ The purchase was made out-of-pocket and I am seeking reimbursement. A check request is included with this form.

Date(s) of Purchase: ______________

<table>
<thead>
<tr>
<th>Vendor</th>
<th>Item(s)</th>
<th>Reason for Purchase</th>
<th>Amount</th>
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**Per IRS Regulations, Travel & Entertainment Expenses description should include who, why, when and where in your description.**

Examples:
1) Lunch at Thai Orchid with Donor XYZ on 3/31/10 to discuss pledge
2) Airfare to Accounting Conf in Phoenix 3/17-19/10 for prof development

I certify the expenses listed above were purchased on behalf of the University of Portland and not for personal use. I am submitting this form in place of the original receipt(s) and will not seek future reimbursement for these purchases.

Purchaser's Signature: ________________________________ Date: __________

Banner ID#: ________________________________

Approver Name: ________________________________

Approver Signature: ________________________________ Date: __________