



CABRINI COLLEGE PURCHASING CARD



Missing Receipt Form

Complete and attach to your monthly report

I, _____, have either not received or misplaced a
Purchasing Card receipt from _____ (vendor name) totaling
\$ _____.

This/these expense(s) were incurred on behalf of Cabrini College. This form is submitted
in lieu of the original receipt.

Statement Cycle: _____

Date: _____

Item(s):

Amount(s):

I certify that the amounts shown above were expended for legitimate Cabrini College
business purposes.

Cardholder Signature: _____ Date: _____

Supervisor Signature: _____ Date: _____