



# Missing Receipt Form

For ProCard or Expense Reimbursement Documentation

ProCard - or -  Expense Reimbursement

Transaction ID (ProCard): \_\_\_\_\_

Transaction Date: \_\_\_\_\_ Posted Date: \_\_\_\_\_

Merchant Name: \_\_\_\_\_

Amount: \_\_\_\_\_

Transaction Note (justification/business purpose):

Explanation of why documentation is currently unavailable:

Provide details regarding the efforts to obtain a copy of the original receipt from the merchant:

\_\_\_\_\_  
Cardholder/Employee Name

\_\_\_\_\_  
Cardholder/Employee Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Approvers Name

\_\_\_\_\_  
Approvers Signature

\_\_\_\_\_  
Date

**Submit this form to the appropriate department in lieu of missing ProCard or Expense Reimbursement documentation.**

**Procurement Card Administration**

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**Accounts Payable**

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