

INSTRUCTIONS FOR COMPLETING LOST/ MISSING RECEIPT FORM

***All sections need to be completed**

➤ *** Enter Cardholders Information**

- Enter Current Date
- Cardholder's Name (For CTS Account- Enter the person that lost the receipt)
- Last 6 digits of credit card or CTS account number
- Type of Card
- Agency Name and Business Area

➤ *** Complete Missing Receipt Information** *(Use One Form per Lost Receipt)*

- Vendor/Merchant Name
- Vendor City, State
- Date of Purchase
- Justification of Purchase- Detailed explanation for why the item was purchased
- List the items that were purchase and the amount
- Total Amount- Should be same amount that shows on statement

➤ **Employee Understanding and Signature** ***Required Signature**

*Cardholder checks the reason receipt was lost, signs and date the application

*Agency Designated Liaison prints name, signs and date the application

*Manager/supervisor of cardholder prints name, signs and date the application.

*Agency Liaison-This employee is appointed by the Agency Director or CFO to manage, and coordinate the cards/accounts within the agency. This person serves as the main reference point between the agency and the Office of State Procurement.

The form should be attached to your monthly statements or transaction log.

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Cardholders should attempt to obtain copies of missing receipts from the vendors.

Current Date	Cardholder Last Name	Cardholder First Name	Middle Initial
Last 6 digits of Credit Card		Card Type	
		<input type="checkbox"/> Purchase Card <input type="checkbox"/> Travel Card <input type="checkbox"/> CTS Account	
Agency Name		Agency Business Area*	

Complete One Form Per Lost/Missing Receipt or Invoice

Vendor/Merchant Name	Vendor Merchant City/State	Date of Purchase
Justification for Purchase:		
Detailed Description of Items Purchased (attach additional sheet if necessary)	Item Amount	
Total Purchase Amount		

Employee Understanding/Signature *Required Signatures

I certify that I made the purchase shown above for official State business only but I do not have a receipt because (check all that apply):

- ☐ I had a receipt but lost it
☐ I requested receipt/invoice, but vendor has not provided it
☐ Vendor did not provide a receipt
☐ Other _____

This document will be used in lieu of receipt/invoice. I understand that repeated loss of receipts instead of obtaining original receipts may result in suspension, termination or other disciplinary action with the use of my account.

*Cardholder Signature & Date: _____ *Liaison Name: _____ (Please Print) *Liaison Signature & Date: _____	*Approving Manager Name: _____ (Please Print) *Approving Manager Signature: _____ Date: _____
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