



Copper Mountain Community College District

Affidavit for a Lost Receipt or Missing Itemization

By completing this form you certify the following:

1. I have made reasonable efforts to obtain a duplicate receipt or itemized statement from the vendor but was unable to do so, or such documentation is not available. If purchase is for food, I attest that no alcoholic beverages were included in this payment.
2. To the best of my knowledge, the amount stated on this form is accurate and represents a legitimate expense incurred by me.
3. No previous reimbursement or payment has been received or paid for this expense.
4. I understand that knowingly making a false statement in this affidavit may subject me to disciplinary action and/or penalties under applicable district policies and law.

Date: _____

Employee Name: _____

Department: _____

Expense Information

Expense Date: _____

Vendor: _____

Amount: _____

Expense Description:

Payment Method District Credit Card ☐ Cardholder Name _____

For Reimbursement ☐ (Expense incurred by employee and requesting reimbursement)

Reason for Missing Documentation: _____

Please include any available supporting documentation:

- | | | | | |
|---|--------------------------------------|--|--|--|
| ☐ Credit Card Statement | ☐ Bank Statement | ☐ Proof of Payment | ☐ Email Confirmation | ☐ Order Confirmation |
| ☐ Vendor Invoice | ☐ Other: | | | |

Accounting Information

Funding Source: _____

_____ - _____ - _____ - _____ - _____ - _____ . _____ - _____

Certification and Approval

I certify that the above-mentioned statement is true and accurate, and that the purchase described was made for and on behalf of Copper Mountain College. I also understand that if this purchase was made on a District Credit Card, that excessive use of this affidavit form may result in the revocation of my participation in the District Credit Card Program.

Employee Signature

Date

Approval Signature
Supervisor/Budget Manager

Date