



Form 3301 FR.05
Missing Receipts Form

Revised 3/29/2018

Contact Information					
Last Name:		First Name:		Middle Initial:	
Phone:		Email:			
Department:					

Transaction and Receipt Information					
Type of Transaction:	<input type="checkbox"/> Purchasing Card (PCard) <input type="checkbox"/> Travel Expense <input type="checkbox"/> Petty cash and other accounts payable				
Reason for Missing Receipt:	<input type="checkbox"/> Lost receipt <input type="checkbox"/> Vendor provided no receipt <input type="checkbox"/> Other; please <u>explain below</u> :				
Description of Expenditure:					
Business Purpose for Expenditure:					
Amount:	\$	Purchase Date:		Paid by:	<input type="checkbox"/> Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Cash

Merchant Information		
Merchant Name (payee):		
Merchant Location (city):		Merchant Location (state):

Employee Certification	
I certify that these expenses were actual and reasonable and incurred for official business of Yale University and that no portion of this claim was provided free of charge, previously reimbursed from any other source, or will be paid by any other resource in the future. Should any portion of this reimbursement be found non-compliant with Yale University policy, I will reimburse the University within thirty (30) days of being notified.	
Employee Signature:	Date:

Lead Administrator Approval	
The Lead Administrator's signature is required for expenditures between \$75.00 and \$999.99.	
Lead Administrator Signature:	Date:

Controller Approval	
The Controller's signature is required for expenditures of \$1,000.00 or greater.	
Controller Signature:	Date: