Substantiation For Lost or Unobtainable Receipts

Lost or Unobtainable Receipt Information

Vendor _____

Transaction Amount _____ **Date of Transaction** _____

Detailed Description (Include: who, what, when, where, and why)

Accounts to be Charged

Cost Object Type	Cost Object #	GL Account #*	Amount
Select Answer			
Select Answer			
Select Answer			
Select Answer			
Select Answer			

* See the Procurement Search Tool for the appropriate GL Account #.

Verification

By submission of this form, I verify that this transaction was for authorized University business, was not reimbursed from another source, and complies with University policy and procedure. By affixing my electronic signature, I agree to conduct business with the University electronically. Signatures and signed copies of this document transmitted by facsimile, email, or other means of electronic transmission shall constitute effective execution and be deemed to have the same legal force and effect as delivery of an original executed copy of this document for all purposes.

_____ _____

Printed Name **Signature and Date**

Approval

Reimbursement may not be processed until the following approvals are obtained:

- **Transaction Under $100**: Budget Assistant
- **Transaction Over $100**: Budget Administrator
- **Transaction Charged to Federal or Federal Flow-Through Funds:** Principal Investigator

_____ _____

Principal Investigator signature **Budget Assistant/Budget Administrator signature**