

**CERTIFICATION FOR MISSING HOSPITALITY RECEIPT**

Purdue University/Purdue Research Foundation

11/2003 TLA

RECEIPT INFORMATION	
Date Paid:	Amount Paid:
Payee: (Name of Firm, Person, etc.)	
Location: (City)	(State)
<b>Description of Hospitality Expenses Incurred (including purpose and names of attendees):</b>	
_____	
_____	
_____	
_____	
_____	
<b>Statement of Reason for Not Having Receipt:</b>	
_____	
_____	
_____	
_____	
<b>Are alcoholic beverages included in the amount listed above? (Check one)      YES      NO</b>	

CLAIMANT CERTIFICATION	
Date: _____	
I, _____,	_____
(Employee / Other Claimant)	(Title)
_____	_____
Department Name	Department Number
certify that the foregoing receipt related to allowable hospitality expense is not available or obtainable, and the information is true and accurate, and the amount shown is legally due.	
Signature _____	

Business Manager Signature: \_\_\_\_\_

NOTE: This form is used when original, itemized receipts are not available to document a Pcard transaction or substantiate a reimbursement request. Reimbursements involving alcoholic beverages must be reimbursed through the Purdue Research Foundation.