

Certificate of Missing Documentation

Date: _____

This form is to be used only when an expense document was lost, accidentally destroyed or unattainable.

Claimant: _____
(Individual who is reporting that a document is missing.)

Purpose: _____
(Was the missing document for an airfare boarding pass, taxi receipt, P-Card receipt, etc.)

Document # _____
(From travel expense claim or cheque requisition.)

Date of Claim: _____
(Date that cheque requisition, travel report or P-Card reconciliation was sent to the Bus Off.)

<p>FORWARD TO:</p> <p><input type="checkbox"/> Research Accounting</p> <p><input type="checkbox"/> Accounts Payable</p> <p>Forward to individual in the Business Office _____</p> <p>TYPE OF MISSING DOCUMENT</p> <p><input type="checkbox"/> P-Card document</p> <p><input type="checkbox"/> Travel report document</p> <p><input type="checkbox"/> Cheque requisition document</p>
--

Fund # _____	Org # _____	Account # _____
Paid on (date) _____	In the amount of _____	
(Date that missing document was issued. Or approximate date.)		
Why Document is Missing ?		

I hereby declare that the original document described above is unattainable or lost. I further declare that I have not and will not use the document(s) to claim reimbursement from any other source.

Claimant (print) _____ Signature _____ Date: _____

Approval: *To be approved by the Fund signing authority and one-over-one signature, where applicable. If missing document is for a P-Card transaction, claimant signature, (fund authority signature if different), and one-over-one signature is required.*

Fund authority (print) _____ Signature _____ Date: _____

Supervisor (print) _____ Signature _____ Date: _____