

**DU/DUHS**  
**CORPORATE CARD MISSING RECEIPT FORM**

I, \_\_\_\_\_, have either not received or misplaced a Corporate Card receipt totaling \$\_\_\_\_\_. This expense was on behalf of Duke.

This form is submitted in lieu of the original receipt.

Reference Number:

Date:

\_\_\_\_\_

\_\_\_\_\_

Supplier:

Amount:

\_\_\_\_\_

\_\_\_\_\_

Items purchased:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

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I certify that the amounts shown above were expended for Duke business purposes. If charged to a grant or contract, I certify that the claimed expenses comply with the conditions of the grant or contract.

\_\_\_\_\_  
Cardholder Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Department Administrator/Chairman

\_\_\_\_\_  
Date

Department \_\_\_\_\_