**Lost Receipt/Invoice Affidavit**

**Cardholder Name (please print):**

**Work Unit (please print):**

**Card Used (check one):**
- Purchasing Card (P-Card)
- Fuel Card

I certify that I made the purchase shown below for official business but do not have a receipt because (check all that apply):

- Supplier/merchant did not provide a detailed receipt
- I have requested an invoice, but the vendor has not provided it
- I had a receipt but cannot locate it
- I have a receipt but it is not readable and this document is provided in order to describe the items purchased
- Order was placed via telephone, fax, or Internet and vendor has not supplied an invoice

All information must be typed, completed on-line, or printed in ink. All information is required. Use one affidavit per lost receipt.

<table>
<thead>
<tr>
<th>Supplier/Merchant Name</th>
<th>City</th>
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</thead>
</table>

**Date of Purchase:**

<table>
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<tr>
<th>Detail Description of Items Purchased (each item limited to 60 characters – attach additional sheet if necessary)</th>
<th>Item Amount</th>
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**Total Purchase Amount:**

| Tax paid: [ ] No [ ] Yes |

This document will be used in lieu of an invoice or receipt for this transaction. I certify that all items listed above (and on the attached, if applicable) were purchased and received for State of Georgia business. I also understand that habitual use of this form instead of submitting actual receipts or invoices will result in suspension or termination of purchasing card privileges.

**Cardholder Signature:** ________________________________  **Date:** ________________

**Supervisory Signature:** ________________________________  **Date:** ________________

**Supervisory Name (print):** ________________________________

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 hers the plain text representation of the document:

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**Supervisory Name (print):** ________________________________
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