

# UMW FINANCE CARD MISSING RECEIPTS VIOLATION FORM



Failing to turn in a detailed, itemized receipt is a violation of University policy and Department of Accounts regulation. Use this form to document the circumstances surrounding the reason for which you do not have a receipt for a charge that was made using the UMW Finance Card. The intention of this form is to document the circumstances for which you do not have a receipt. Use of this form does NOT remove you from being responsible for having a receipt and **does NOT remove you from personal liability of the charge on the Card**. Completing this form does not exempt the employee or student from reprimand. The Finance Department reserves the right to revoke card privileges at any time.

Card User Name: \_\_\_\_\_

LAST FOUR DIGITS of Card Number: \_\_\_\_\_

Card User Phone Number: \_\_\_\_\_

Vendor Name: \_\_\_\_\_

Transaction Date: \_\_\_\_\_

Item(s) or Service Purchased:  
BE SPECIFIC. Business Meals must include documentation of individual food & drink item(s) provided. In addition, include a statement to verify that no alcohol was included in the charge.

\_\_\_\_\_

Date attempted to contact vendor for missing or duplicate receipt: \_\_\_\_\_

Results from trying to get a duplicate receipt:

\_\_\_\_\_

Reason for Missing Receipt:  
(PROVIDE DETAIL to explain why the original receipt was not obtained.)

\_\_\_\_\_

## Important Information

This purpose of this form is to:

- (1) Document the reason for not having a receipt for the item(s) or service purchased, and
- (2) To have a UMW President's designee sign to confirm that the item(s) or service purchased was an appropriate expense and is one that was provided to, or belongs to, UMW.

The use of this form does NOT remove the Card user from personal liability of the purchase made on the UMW Finance Card.

*I hereby certify that the expenses listed above were incurred by me and are necessary and appropriate expenditures for UMW. By my signature, I acknowledge that the goods purchased become the property of UMW and services provided were for UMW.*

Card User's Signature \_\_\_\_\_ Date \_\_\_\_\_

Card User's Supervisor's Signature \_\_\_\_\_ Date \_\_\_\_\_  
Printed Name \_\_\_\_\_

*NOTE: If the Card User's Supervisor is also a designated signer for the UMW President, sign in the area for the Signature of the President or Designee below.*

*I certify that the charge listed above for the service or item that was purchased using the UMW Finance Card was an appropriate service that was provided to UMW for official UMW business or is an appropriate item for UMW to own and will remain the property of UMW.*

Signature of President or Designee \_\_\_\_\_ Date \_\_\_\_\_