

AFFIDAVIT OF LOST RECEIPT~ ASB

I hereby report that I have lost the receipt, or have been unable to secure a receipt for the Auburn School District No. 408 credit card purchase identified below:

Check all that apply:

- ☐ I have lost a receipt.
- ☐ I have been unable to secure a receipt.
- ☐ I have made several attempts to secure a receipt by contacting the vendor.
- ☐ I have attached the packing slip with this form.
- ☐ I have attached a portion of the product packaging (box flap, etc.) to this form.
- ☐ I have attached a copy of my order form to this form.

Date of Purchase: _____

Account Code: _____

Merchant: _____

Amount of Purchase: _____

Item(s) Purchased: _____

Additional Comments: _____

This signed document will be placed on file as a substitute for the original receipt. I understand that repeated incidences of lost receipts constitutes "misuse" of the credit card and may result in loss of credit card privileges.

Staff Signature

Date

ASB Student Signature

Date

ASB Activities Coordinator Signature

Date

ASB Bookkeeper

Date

Assistant Superintendent

Date