

SOUTHERN METHODIST UNIVERSITY

TRAVEL REPORT MISSING RECEIPT FORM

I, _____, have either misplaced or not received a Travel Report receipt totaling \$_____. This expense was on behalf of Southern Methodist University.

This form is submitted in lieu of the original receipt for the following:

Date: _____ Supplier: _____ Item Purchased: _____ Amount: _____

Date: _____ Supplier: _____ Item Purchased: _____ Amount: _____

Date: _____ Supplier: _____ Item Purchased: _____ Amount: _____

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

Traveler Signature

Date

Principal Investigator Signature

Date

Department Administrator/FO

Date