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:

___________________________  ___________________________
___________________________  ___________________________
___________________________  ___________________________

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.

_________________________________  Date

Cardholder Signature

_________________________________  Date

Department Administrator/Chairman

_________________________________  Date

Department

___________________________