UNIVERSITY OF ALASKA CERTIFICATION OF UNAVAILABLE DOCUMENTATION

This form should be completed for any ProCard transaction that does NOT have documentation from the merchant.

Cardholder Name	Department Name		
Cardholder's Approving Official			
Merchant Name	Transaction Date (mm/dd/yyyy)		
Transaction Amount \$			
<u>Description of Items or Services</u> (Add an additional sheet if necessary)	Quantity	Cost Per Item	Total Cost
(Add an additional sheet if necessary)		\$	\$
		\$	\$
		\$	\$
		\$	\$
		\$	\$
REASON ORIGINAL DOCUM	ENTATION IS NOT A	VAILABLE	
CARDHOLDER HAS MADE THE FOLLOWING ATTEMPT			
TO OBTAIN RECEIPTS OR DOCUMENTATION			
CARDHOLDER CERTIFICATION SIGNATURE			
CARDITOLDER CERT	II ICATION SIGNATO	NL .	
I have by contifue the fallowing.			
I hereby certify the following:			
 All items purchased on this ProCard transaction were for University use. No personal purchases were made. 			
 The Cardholder will not seek reimbursement from the University in any other manner for this transaction. 			
 Original documentation is not in Cardholder's posse 	ession for the reasons	stated above.	
Cardholder acknowledges that repeated lack of documentation could result in revocation of their ProCard.			
Cardholder Name:			
Signature:		Date:	
Orginatare.			