

Affidavit in Lieu of Receipt

**Minnesota State Colleges and Universities
Bemidji State University & Northwest Technical College
Purchasing Card Program**

State of Minnesota
County of _____

I, _____, being first duly sworn, say that I am an employee of the State of Minnesota, Minnesota State Colleges and Universities and that the following purchase(s) was (were) paid by my Purchasing Card:

1. Merchant: _____
Date of Purchase: _____ Amount: _____
Item(s) Purchased: _____
Purpose/Use: _____
Reason for No Receipt: _____

Corrective action to prevent from recurring: _____

2. Merchant: _____
Date of Purchase: _____ Amount: _____
Item(s) Purchased: _____
Purpose/Use: _____
Reason for No Receipt: _____

Corrective action to prevent from recurring: _____

3. Merchant: _____
Date of Purchase: _____ Amount: _____
Item(s) Purchased: _____
Purpose/Use: _____
Reason for No Receipt: _____

Corrective action to prevent from recurring: _____

The above expense(s) was (were) incurred as an employee of the State of Minnesota on official business.

Subscribed and sworn before me this _____ day of _____, 200_____.

Employee's Signature

Notary Public
_____ County, Minnesota

My commission expires: _____
Seal: