

**Missing Receipt Affidavit**

*(purchases other than P-Card purchases without a receipt)*

State of: Oklahoma

County of: Oklahoma

The undersigned (employee of Oklahoma City Public Schools) of lawful age, being first duly sworn, on oath says that this claim is true and correct. Affiant further states that the payment request as shown below are for the goods / services listed below for the benefit of Oklahoma City Public School District, and were in accordance with all District Policies and Procedures.

The undersigned also understands that if the payment request is for anything otherwise, the undersigned may receive disciplinary action up to and including termination.

Amount \_\_\_\_\_

Payee / Vendor \_\_\_\_\_

Description of Charge 

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\_\_\_\_\_  
Signature

\_\_\_\_\_  
CFO Approval

Subscribed and sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_

\_\_\_\_\_  
Notary Public (or Clerk or Judge)

My Commission Expires: \_\_\_\_\_