

THE UNIVERSITY OF SOUTHERN MISSISSIPPI
PROCUREMENT CARD
MISSING DOCUMENT AFFIDAVIT

CARDHOLDER: _____, ACCOUNT NUMBER: _____

Signature of Department Supervisor: _____

Item Description	Date of Purchase	VENDOR	Cost
------------------	------------------	--------	------

Detailed explanation of missing documentation:

The undersigned employee responsible for said missing documentation hereby states that the above facts are true and correct to the best of his/her knowledge.

DATE: _____; SIGNATURE OF EMPLOYEE _____

This Date Personally Appeared Before Me, the undersigned authority, in and for _____ County, State of Mississippi, the above named employee, who, being first duly sworn, state on his/her oath that the above facts are true and correct to the best of his/her knowledge.

GIVEN UNDER MY HAND AND OFFICIAL SEAL, this the ____ day of _____, 20

Notary Public

NOTE: This affidavit shall be attached to the Cardholder's statement and filed with the Approving Official.