



**Administrative
Services**

SUBSTITUTE RECEIPT

This form validates a purchase UNDER \$50.00 when an original receipt is unavailable. By using this form, the employee agrees to the following:

- I understand that a substitute receipt form cannot be submitted on a routine basis.
- I certify that the amount shown is the amount actually paid.

Type: Collin T-Card Out of Pocket Expense

Name: _____
Name of Supplier: _____
Date of Transaction: _____
Transaction Total: _____
Reason for Purchase: _____

Item Description	Quantity	Unit Cost	Total Cost
		\$	\$

Employee Signature

Date