	Anne	Arundel	Community	College
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Non-Receipt Form

☐ I was unable to obtain a receipt.

☐ I lost my original receipt.

Other (explain)

I certify that I incurred the expense itemized below while conducting business for the Anne Arundel Community College and I have not previously been reimbursed for this expense. I also understand that the College periodically audits non-receipt claims for expenses to verify the validity of claims.

Amount:	Date:	
Paid To:		
Address of Vendor:		
Purpose of expense:		
Signature:		
Printed Name:		