THE UNIVERSITY OF SOUTHERN MISSISSIPPI
PROCUREMENT CARD
MISSING DOCUMENT AFFIDAVIT

CARDHOLDER:________________________, ACCOUNT NUMBER:_____________________

Signature of Department Supervisor:________________________________________________

<table>
<thead>
<tr>
<th>Item Description</th>
<th>Date of Purchase</th>
<th>VENDOR</th>
<th>Cost</th>
</tr>
</thead>
</table>

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.