

# County of Santa Clara

## MISSING RECEIPT MEMORANDUM

Purchase is equal to or over \$10- one form per missing receipt)

DATE: 2/22/2012

TO: \_\_\_\_\_

Cardholder's Approving Official

FROM: George Shirakawa

Name of Cardholder

P-Card holder's Account Number: [REDACTED]-0863

SUBJECT: Explanation of Missing Receipt for Amount equal to or over \$10.

Name of Supplier/ Vendor/ Merchant: PF Changs

List details of the item(s) or travel related service(s) of the missing receipt with the quantity and the unit price (attach copies, other documents if available, i.e. order form, registration form, etc.):

MEETING

- No ALCOHOL was served.

Mtg with Councilmember Campos and Staff

Missing receipt amount: \$ 97.15

Date(s) of the purchase or travel-related service(s): 2/17/2012

I attest that the item(s) or travel-related service(s) on the missing receipt was purchased for the purpose of accomplishing County business.

[Signature]  
Cardholder's Signature

408.299.5020  
Cardholder's Phone Number

I have reviewed and approved the reason for the missing receipt.

[Signature]  
Approving Official's Signature

Department/ Agency Head's Signature (For missing receipts amount over \$50.00.)

Rev July 06