

DEPARTMENT OF FINANCE AND ADMINISTRATION
AFFIDAVIT FOR LOST, DAMAGED OR INCOMPLETE RECEIPTS
Travel and Per Diem

I, _____ certify that actual receipts for expenses in the amount of (print name and business unit).

\$_____ incurred while in the conduct of business for the State of New Mexico, were lost damaged or incomplete.

Travel Dates (date & time of expenses incurred)	Lodging Expenses (name of vendor, actual dollar amount incurred & description)	Other Expenses (name of vendor, actual dollar amount incurred & description)

Employee Signature

Date

Agency Head Signature

Date