



# CAL STATE LA

CALIFORNIA STATE UNIVERSITY, LOS ANGELES

## CERTIFICATION OF RECEIPT GOODS

I CERTIFY THAT I HAVE MADE EVERY ATTEMPT TO OBTAIN AN ORIGINAL RECEIPT/INVOICE FOR THE FOLLOWING ITEMS:

User Name

Department

Your Email

Name of Vendor

Purchased Date

Item Description

Quantity

Item Number

Unit Price

Extension

Current Total

Other Amount

Total

Reason(s) original, itemized receipt/ invoice was not obtained for this order

Cardholder Signature

Date

Cardholder Signature

Date