



California State University, Northridge
18111 Nordhoff Street, USU SW 100
Northridge, CA 91330-8350
Phone (818) 677-2389 Fax 677-7731

Certificate of Expenditures

I certify that I did spend the amount(s) listed, for the purpose the funds were designated, and in my judgment, were necessary and proper expenditures.

CHECK ONE: Receipts or Invoice Lost

Receipts or Invoice Not Obtained

LIST OF EXPENDITURES:

1. Amount of Purchase Date of Purchase Place of purchase

Items Purchased

2. Amount of Purchase Date of Purchase Place of purchase

Items Purchased

3. Amount of Purchase Date of Purchase Place of purchase

Items Purchased

4. Amount of Purchase Date of Purchase Place of purchase

Items Purchased

Total Amount Requesting: \$ _____

Signature: _____

Date: _____

Signature and date required from each person(s) claiming reimbursement! No reimbursements will be made without signature(s). If you have more items to be listed, please use the back of this form. Please call A.S. Accounting at x2389 if you have any questions.