



PERJURY STATEMENT

The Henry M. Jackson School of International Studies
University of Washington, Box 353650

PLEASE TYPE FORM

Date: _____

Under penalty of perjury, I hereby certify or declare that I, _____
(print full name)
incurred the cost of \$ _____ for *[describe purchase below]*

CHOOSE ONE:

1. I have an original receipt, but it is not marked "paid in full" or "balance zero" or the like.
2. I do not have an original receipt because:

3. I do not have an original ITEMIZED RECEIPT - Because:

NOTE: If no itemized receipt is obtained the charge must be on a discretionary budget (64)

CHOOSE ONE:

1. I have proof of purchase in the form of a credit card receipt and I am submitting it.
2. I have proof of purchase in the form of a bank statement or credit card statement of this transaction and I am submitting a copy of that statement. ***(Please black out all other transactions and all account numbers and other identifying information except for your name.)***
3. I have proof of purchase in the form of _____
and I am submitting it.
4. I do not have any proof of purchase because:

Vendor/Place of Purchase: _____

Budget: ____ – ____ I further certify or declare that I am not being reimbursed for this expenditure from any other source.

Signature of Purchaser: _____

Budget Authorization/Approval Signature: _____

Date: _____

Financial Administrator's Signature of Approval: _____

(Dvorah Oppenheimer)

Date: _____