Personal Use Reimbursement Form

Original receipt and reimbursement must be attached to this form.



, unintentionally utilized a county credit card for a personal purchase. This purchase was accidental and will be reimbursed as soon as possible.

Date of Purchase: ______ Vendor: ______ Amount: \$______

Briefly state the reason this accidental purchase occurred:

I certify that the items above were purchased using the county credit card in error and I understand that repeated accidental personal use of the county credit card may result in loss of credit card privileges. I also understand that the continued misuse/abuse of county credit cards may result in disciplinary action up to and including termination.

Purchaser (Signature/Date)

Fiscal Contact (Signature/Date)