

LOST RECEIPT REPORT

I am unable to provide a receipt/invoice/charge slip for the following transaction on

Disbursement # _____.

DATE OF PURCHASE / EXPENSE: _____

VENDOR NAME: _____

ADDRESS: _____

TRANSACTION TOTAL: \$ _____

PROVIDE AN ITEMIZED LIST OF ALL ITEMS PURCHASED

(If more than 10 items attach a list):

_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

REASON FOR FILING:

Lost Receipt

Illegible (attach original copy)

Employee Name (printed)

Employee Signature

Supervisor's Signature

Date