



## Lost Receipt Form

**Please submit this form with your expense report if you have lost a receipt.**

Transaction Date:	
Post Date:	
Vendor Name:	
Transaction Description:	
Total Amount (including taxes and/or gratuity):	

I recognize that I have made all possible efforts to locate the lost receipt, and I affirm that the transaction mentioned above is legitimate for a business purpose even though the receipt is missing or was not obtained.

Cardholder's Name: \_\_\_\_\_  
(print)

Signature: \_\_\_\_\_

Manager's Name: \_\_\_\_\_

Signature: \_\_\_\_\_

Title: \_\_\_\_\_

Date: \_\_\_\_\_