



## 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<br>(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: \_\_\_\_\_ Signature: \_\_\_\_\_  
(print)