

Missing Receipt Statement

EXPENSE TRANSACTION INFORMATION

Employee Name: _____

Current Date: _____

Department Name: _____

Transaction Date: _____

Vendor Name: _____

Amount \$: _____

☐ check this box if at least one attempt was made to obtain a duplicate receipt from vender/merchant

ITEMIZED DESCRIPTION OF PURCHASE

MISSING RECEIPT AFFIDAVIT

I certify that the transaction amount documented above was incurred on behalf of Bayside Community Church as a legitimate business expense. The charge complies with Bayside's purchasing policy and authorization limits. This form is submitted as a substitute to the original missing receipt.

By attaching this form to my expense report, I am affirming this certification and all information contained in the form.

Signed: _____

Date: _____