

Lost Receipt Declaration Form

Declarant Information

- Full Name: _____
- Position: _____
- Contact Number: _____

Details of Lost Receipt

Expense Description	Date	Vendor	Amount

Reason for Missing Receipt

Explain the circumstances of the lost receipt:

Declarant Certification

I certify that the above expenses are true and incurred for official purposes, and I acknowledge that misrepresentation may result in disciplinary action.

Approval Section

- Approving Authority Name: _____
- Signature: _____
- Date: _____