DECLARATION OF MISSING RECEIPT

Please indicate reason for submitting form (select all that apply): Receipt was lost and all measures to obtain a duplicate receipt have been exhausted* Receipt was unavailable* Itemized receipt was not available* Receipt provided does not include proof of payment			
		This is to verify that I,	(payee) paid \$
		on (date of purchase). The purchase was made for the	
		(name of event/activity) sponsored by	(name of RCO).
		Vendor Information: Vendor Name & Address: List of item(s) purchased:	
* Because original receipt is not available, I attest t Was not purchased or included on this receipt			
Was purchased and expense is not going to be	e charged to State or Federal funds		
Was purchased, costing	and was deducted from this request		
By signing below, I declare that these expenditures are source.	e accurate and will not be claimed from any other		
Payee's Signature	Date		