Declaration of Lost Receipt

This form is to be completed when a receipt required for reimbursement or reconciliation has been lost. Incorrect or incomplete information will cause delays in processing. Send the completed form to Accounts Payable, Financial Services, A291.



Personal Information	
Employee Name:	
UFV Employee ID:	
Receipt Information	
Company Name: _	
Phone Number:	Purchase Date:
City:	Purchase Amt:
Description of Purchase:	
Agreement and Signatu	ro.
Agreement and signature	
While traveling/or working for the University of the Fraser Valley on official business, I incurred the expense described above. I have lost, misplaced or did not receive the receipt documenting the payment. I am submitting this statement in lieu of the missing receipt.	
I certify that these are proper charges for costs incurred while on official University of the Fraser Valley business and that I have not previously requested nor will I again request reimbursement for these expenses.	
Authorization	
Employee Signature:	Date:
Supervisor Signature:	Date:
For Internal Use Only	
Reviewed By Name:	
Reviewed By Signature:	Date:/ /