



MISSING RECEIPT FORM

Your Name: _____

Vendor Name: _____

Receipt Date: _____

Receipt Breakdown:

Office Use Only	Ministry	Account	Description of Expense	Amount
				Total: \$

Reason receipt is missing:

I certify that the foregoing receipt is not available or obtainable, the information is true and accurate, and the amount shown is legally due.

Your Signature: _____

Ministry Leaders must approve BEFORE you submit your request to the church office.

Ministry Leader Name: _____

Ministry Leader Signature: _____