



Lost Receipt Form

I hereby certify that the original receipt was lost, accidentally destroyed or unobtainable and that the information detailed below is complete and accurate.

Receipt Information

Date of Receipt: \_\_\_\_\_

Total Amount of Receipt (including taxes): \_\_\_\_\_

Vendor Name: \_\_\_\_\_

Description of Goods and / or Services:

\_\_\_\_\_

Reason Receipt Was Lost: \_\_\_\_\_

Taxes Applicable:

Post July 1, 2010            HST    ☐

Pre July 1, 2010            GST    ☐            PST    ☐

Alcohol Charges:

Yes    ☐            No    ☐

If a "lost" meal receipt, does the receipt cover more than one individual? If so, please note individual name(s) and business purpose:

\_\_\_\_\_

Claimant Signature

\_\_\_\_\_

Claimant Name (please print)

\_\_\_\_\_

Date

\_\_\_\_\_

*Please attached this form to your Travel Expense Form*