

MISSING MEAL RECEIPT FORM

TAPE PARTIAL RECEIPT BELOW

Meal: (Choose 1)

Meal UNDER \$10 (ACTUAL COST; NOT a per diem)

Meal OVER \$10

Receipt: (Choose 1)

Missing ITEMIZED portion of receipt

Missing PAYMENT portion of receipt

Missing TOTAL receipt

Reason: (Choose 1)

Lost / Misplaced

Restaurant Not Provide

Shared Meal/Another has receipt
(wide usage not recommended)

Other _____

Restaurant: _____

City, St: _____

(Day) (Date) (Time)

Meal (Bfast-Lunch-Dinner): _____

Brief Description of Purchase:

Cost: \$ _____

Tax _____ % : \$ _____

Sub Total \$ _____

Tip _____ % \$ _____
(Max 20%)

TOTAL: \$ _____
(If exceeds cap, claim cap only \$ _____)

Payment made by approved traveler: (Choose 1)

Cash Credit/Debit Card

Initial All 3 Lines Below:

No ALCOHOL reimbursement requested.

Items reimbursed for approved traveler
only (not shared with any others.)

Requesting actual expenses incurred.

(Traveler)

(Supervisor or Travel Designee)