

INVOICE
MISSING RECEIPT AFFIDAVIT

Date: \_\_\_\_\_

PURCHASED FROM

Company Name: \_\_\_\_\_

Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

PAYEE INFORMATION

Payee Name: \_\_\_\_\_

DESCRIPTION OF EXPENSE

COST

Please list the items purchased:

Table with 2 columns: Description of Expense, Cost. Multiple rows for listing items.

TOTAL \_\_\_\_\_

CERTIFICATION

I certify that this is a true and just invoice for which payment has not been received and should take the place of a lost or incomplete receipt and/or invoice.

Payee (Signature)