MISSING GAS RECEIPT FORM
(TO BE USED WHEN NO RECEIPT IS AVAILABLE)

Name: ________________________________

Shop: ________________________________

Truck #: ______________________________

Location of Purchase: ________________________________

Date of Purchase: ________________________________

Time of Purchase: ________________________________
(approximate)

Type of Purchase: ________________________________
(gas, oil, etc.)

Amount: ________________________________

“I certify the above transaction was a legitimate University business expense for which the receipt was lost.”

Signature ________________________________ Date ________________________________