

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)