

## LOST RECEIPT AFFIDAVIT

This is to certify that on \_\_\_\_\_ a transaction was made in the amount of \$ \_\_\_\_\_  
for \_\_\_\_\_.

Vendor's Name: \_\_\_\_\_

Vendor's Address: \_\_\_\_\_

ITEMS PURCHASED	AMOUNT
_____	_____
_____	_____
TOTAL AMOUNT _____	

Code to GL acct(s):

*I further certify that the **itemized receipt** for this payment has been lost or was not received from the vendor. I further certify that the goods and services represent legitimate expenses incurred solely for the benefit of the City of Gulf Breeze.*

Employee Printed Name \_\_\_\_\_

Employee Signature \_\_\_\_\_

### APPROVED FOR EXPENDITURE:

\_\_\_\_\_  
Department Head

\_\_\_\_\_  
City Manager