



13 North Park Street
Cuba, New York 14727
(585)-968-2347

LOST / NO RECEIPT FORM

Purchaser: _____

Title: _____

I hereby certify that I incurred the following expenses:

1. No receipt was given or the receipt was lost.
2. These expenses were incurred in the conduct of church business.
3. I have made no previous claims for these expenses.

Date _____

Vendor _____

Amount _____

Method of Payment _____

Description of charge:

Signature _____