



Affidavit of Lost Receipt

1	State of California)
	County of Santa Barbara)
	I, _____, being duly sworn, deposes and says, that detailed (Employee name)
	receipt(s) for: _____ in the amount of dollars \$ _____ (Meals, taxi, lodging, registration, etc.)
	from _____ incurred on _____ have been lost/destroyed. (Name of company) (Date)

2	Certification
	I further certify that the expenditures incurred were for the benefit of employees or trustees of the district and any expenditure for non-employees will be reimbursed to the District.
	I further certify that items purchased constitute a legal claim against the District and that no prohibited items (alcohol, tobacco, etc.) are included.
	_____ (Employee signature) _____ (Date)
	_____ (Administrator) _____ (Date)
	_____ (Administrator) _____ (Date)

This affidavit form is to be used if you have lost/destroyed a receipt that you want to include for reimbursement.

1. Complete this form, sign, and attach to your travel/conference claim.
2. Submit to administrator and obtain approval.
3. Submit this form with your travel/conference claim to the Business Office.