Form 8.10 – Missing Receipt Form

Please use this form for a missing receipt for a payment made on behalf of the 4-H club.

4-H Club:	
County:	
I, declare that:	(payee name)
I paid monies on behalf of the	
personal funds OR 4-H club funds as follows:	
Date:	Amount paid: \$
Business name:	Business address:
Description of the supplies or services purchased:	
Purpose for which the supplies or services were purchased:	
I am missing the receipt on which the word "Paid" appears for the expenses incurred. Describe the	
attempts made to obtain the original receipts.	
If purchase(s) were made using personal funds, please fill out the following fields. Leave these fields	
blank if 4-H club funds were used.	
\square I declare that all efforts to obtain a duplicate receipt have been made. I hereby request that the	
4-H Club reimburse me for this expense	
of my personal monies.	
Signature of payee:	(Date)
Mailing address of payee:	
Signature of Treasurer (required):	(Date)