

815 21st Street SE • Puyallup, WA 98372 Phone: (253) 841-1776 Fax: (253) 841-2232

Lost or Unavailable Receipt Form (Use this form if you are unable to provide an original receipt)

Purchaser's Name:			Today's Date:	
Indicate your campu	ıs:			
☐ District Office	☐ Frederickson ELC		☐ McAlder ELC	☐ Puyallup ELC
☐ Junior High	☐ Frederickson Elementary		☐ McAlder Elementary	☐ Puyallup Elementary
☐ High School ☐ Frederickson Rec		☐ McAlder Rec	☐ Puyallup Elementary Rec	
EXPENSE DETAIL:	:			
Amount:				
Merchant Name:				(e.g., restaurant
Participant(s	s):			
Transaction	Date:			
Location of Expense:				
	al Ledger			
Accou	nt No.:	(example: xxxx-	xx-xxx)	
Describe bu	ısiness purpo	se for expense	:	
Describe re	asonable effo	orts to obtain c	opy of the receipt:	
Approval sig	gnatures for _l	payment:		
Purcha	aser's Signat	ure:		Date:
Administrator's Signature:				Date: