



809 Legion Way
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MISSING RECEIPT AFFIDAVIT

I acknowledge that this expense report contains legitimate non-profit corporate expenses incurred by me on behalf of Rebuilding Thurston County's, and are allowable expenses as defined by RTTC policy. I further certify that the receipt(s) applicable to this expense is no longer available.

Expense information

Merchant/Company: _____

Date: _____

Dollar amount: _____

Expense Purpose: _____

Name and signature: _____

Date report submitted: _____

Expense reviewed:

Report reviewed and approved by Board President or Treasurer

Name and signature: _____

Date approved: _____

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