

**ROSEVILLE  
CUB SCOUT PACK 1592  
EXPENSE REIMBURSEMENT  
MISSING RECEIPT DECLARATION**

**Leaders should use this form when submitting an Expense Reimbursement Form and a receipt has been lost or is no longer available.  
Requires two-party approval from the Committee Chair and Treasurer.**

**Submitted By:** \_\_\_\_\_ **Submission Date:** \_\_\_\_\_

**Expense Date:** \_\_\_\_\_

**Expense Amount: \$** \_\_\_\_\_

**Merchant:** \_\_\_\_\_

**Items Purchased:** \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Purpose:** \_\_\_\_\_

\_\_\_\_\_

**Submitter Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Approved By:**

**Committee Chair Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Treasurer Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_