CERTIFICATION OF MISSING OR LOST RECEIPT

**NOTE: Duplicate copies of receipts are usually readily available from hotels, airlines, and vehicle rental agencies. Due to requirements to list daily basic rates, taxes, and fees separately for claimed expenses, you must attempt to obtain copies of the original receipts from these vendors. For CONUS travel, daily lodging rates and taxes, when applicable, are separately claimed expenses. When claiming airfare, CTO fees are claimed separately from the airfare. When using this form in place of a receipt, you are responsible for fully reading, understanding and completing this certification for your claimed expenses.

In accordance with Joint Federal Travel Regulations, Vol. I, Part F, paragraph U2510 (Military), Joint Travel Regulations, Vol. II, Part E, paragraph C1310 (Civilian), AFI 65-114, Chapter 8, paragraph 8.6.4, and DoDFMR Volume 9, paragraph 080305, "Attach all supporting documentation including the original or legible copy of orders and receipts for all lodging expenses, as well as claimed reimbursable expenses of \$75 or more."

SECTION I - EXPENSE(S)

DO NOT include the following items with any amounts listed below:

- Optional insurance (Loss Damage Waiver, Personal Accident Insurance, etc...) on vehicle rentals, unless the rental is OCONUS.

lodging facilities, o c. Airfare that was no	or any other expense in t personally procured	incurred for personal c d or airfare that was ch	onvenience. arged to a Cen		-		es at
d. Expenses incurred while on leave or other non-per-diem status 1. LODGING (Hotel Name)			(City)			(State/Country)	
Was room shared with any military/gov't employees?	If room was shared with were they on funded tra	military/gov't employees, vel orders?	Check-in Date:	Check-out Date:	Daily Room Rate:	Daily Tax:	Total Cost:
☐ Yes ☐ No	☐ Yes	□ No			\$	\$	\$
LODGING (Hotel Name)			(City)			(State/Country)	
Was room shared with any military/gov't employees?	If room was shared with military/gov't employees, were they on funded travel orders?		Check-in Date:	Check-out Date:	Daily Room Rate:	Daily Tax:	Total Cost:
☐ Yes ☐ No	☐ Yes ☐ No				\$	\$	\$
2. AIRFARE (Carrier Name)	Travel From: City & State/Country	Travel To: City & State/Country	Date Traveled:	Base Airfare Cost: \$	Airfare Taxes:	CTO Fee:	Total Cost:
Was the ticket purchased through t	L the CTO? ☐ Yes ☐	No Was any indirect rout	I ing used (i.e. leav	*	↓\$ us travel) □ Ye	\$ No	\$
This airfare was purchased with:	☐ My individually billed	GTC / CSA ☐ My ui	nit's centrally bille	d GTC (CBA)	☐ A personal	credit card	
AIRFARE (Carrier Name)	Travel From: City & State/Country	Travel To: City & State/Country	Date Traveled:	Base Airfare Cost:	Airfare Taxes:	CTO Fee:	Total Cost:
				\$	\$	\$	\$
Was the ticket purchased through t	the CTO? Yes	No Was any indirect rout	ing used (i.e. leav	e/leisure/circuitou	us travel) Ye	s 🗌 No	
This airfare was purchased with:	My individually billed		nit's centrally bille	· · · · · · ·	A personal		T =
3. RENTAL CAR (Company Name)	Date Vehicle Rented:	Date Vehicle Returned:	Basic Rental Rate:	Taxes:	Insurance: (OCONUS only)	Fuel Paid In Advance:	Total Cost:
			\$	\$	\$	\$	\$
4. TAXI/LIMOUSINE/VAN Company Name	Travel From: City & State/Country	Travel To: City & State/Country	Basic Fare:		Tip:	Total Cost:	
			\$		\$	\$	
5. OTHER TRANSPORTATION (Carrier Name)	Travel From: City & State/Country	Travel To: City & State/Country	Type (bus, train, etc):	Base Cost:	Taxes:	Tip:	Total Cost:
6. REGISTRATION / CONFERENCE	CE FEE (Purpose)	Paid To:	Were any meal	\$ a included *	\$ Was any lodgir	\$	\$ Total Cost:
6. REGISTRATION / CONFERENCE FEE (Fulpose) Paid 10.			Were any mear	S included ☐ No	Was any lough	□ No	\$
*Note: If meals were included in you DTS, indicate any deductible meals not claim reimbursement for the ap	s on the DTS Per Diem Er						
7. OTHER EXPENSE (Be Specific	ng baggage or Date of Expense:		Total Cost:				
property, you must include weight tickets.						\$	
		SECTION II - EX					
Provide full explanation why receip	t is not available and action	ons taken to obtain replacem	nent receipt. For a	airfare indicate if \	Virtuallythere.com	was used to obta	ain receipt.
		SECTION III – CE	RTIFICATIO	N			
I certify I attempted to obtain copexpense(s) for which the receipt in denial of claimed expenses. I (U.S. Code, Title 18, Sections 28	is missing and/or lost fo also understand there a	from the above named ver or presentation with the tra re severe criminal and civ	ndors and have k avel claim. I und	peen unable to d lerstand failure t	o complete this	form in its entire	ty may result
Traveler's Name (Last, First, M.I.)		2. Signature				3. Date Signed	