



**APPENDIX A**  
**LIVINGSTON COUNTY, MICHIGAN**  
**RECEIPT AFFIDAVIT**

A separate affidavit must be completed for each lost/non-itemized receipt

On \_\_\_\_\_ I misplaced / lost / didn't receive an itemized receipt  
(Date)

For \_\_\_\_\_

From \_\_\_\_\_  
(Name and location)

Amount \_\_\_\_\_  
(Enter total amount)

I certify to the following (please initial each section):

\_\_\_\_\_ This represents a legitimate business expense incurred while traveling on behalf of Livingston County

\_\_\_\_\_ The expense incurred was solely for me, or, if paying on behalf of another employee I will specify the employee **by name here**:  
\_\_\_\_\_

\_\_\_\_\_ No alcoholic beverages, tobacco products, or gift cards were purchased

\_\_\_\_\_ I certify that I have not previously been reimbursed for this expense

\_\_\_\_\_  
(Print Employee Name)

\_\_\_\_\_  
(Signature of Employee)

\_\_\_\_\_  
(Department)

\_\_\_\_\_  
(Elected Official/Director or Deputy Director Signature)

\* As Director, I acknowledge that the employee, while on authorized business, did not follow County policy. I will ensure all my employees receive a copy of the Business Expense Reimbursement Policy prior to travel.

The Business Expense Reimbursement Policy can be found here: <https://www.livgov.com/administration/Pages/policies.aspx>

12/2019