PETTY CASH REIMBURSEMENT

DEPARTMENT_____ **TOTAL AMOUNT $**_____

ACCOUNT #

DESCRIPTION	ACCOUNT CODE	AMOUNT OF RECEIPT

TOTAL………………………………………………………………$$$

CASH SUMMARY:

Total Cash _____
Total Petty
 Cash slips _____

*Total Amount _____

Overage _____

Shortage _____

REQUESTOR:_____ DATE: _____

SUPERVISOR: _____ DATE: _____

ACCOUNTING: _____ DATE: _____