PETTY CASH

REIMBURSEMENT REQUEST

Note: Reimbursements from petty cash cannot exceed $50.00.

|  |  |  |  |
| --- | --- | --- | --- |
| Date |  | Department |  |
| Amount of Reimbursement |  | Requested By |  |

|  |  |
| --- | --- |
| Description of Expense |  |

|  |  |  |  |
| --- | --- | --- | --- |
| Account Number |  | Approved By |  |
| Signature | | | |
| Amount Approved |  | Received By |  |
| Signature | | | |