

# PETTY CASH VOUCHER

Complete all the information and **submit receipts** for expenditures to Tina Meade in Administration and Finance; her office number is 367.

**If an advance is received**, receipts should be submitted after the expenditure is made.

**NOTE: If no receipt is available, indicate reason why receipt is not available.**

PRINTED name of person requesting reimbursement: \_\_\_\_\_

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Requested on (date): \_\_\_\_\_ Phone extension: \_\_\_\_\_

ACCOUNT TO BE CHARGED: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_  
2-digit FUND      6-digit DEPT      6-digit OBJECT CODE

IF ADVANCE RECEIVED: Amount of Advance: \_\_\_\_\_

Amount of Expenditure: \_\_\_\_\_

Explanation of Expenditure: \_\_\_\_\_

If no receipt, explain: \_\_\_\_\_

***For use when cash reimbursement is distributed***

Date cash reimbursement received/distributed: \_\_\_\_\_

Signature of person receiving cash reimbursement: \_\_\_\_\_

Printed name of person issuing cash reimbursement: \_\_\_\_\_

Signature of person issuing cash reimbursement: \_\_\_\_\_