(Use this form for individual reimbursements and for reimbursement to an established petty cash fund)

NOTE: Purchases through petty cash cannot exceed \$30.00 per expenditure. Items available on state contract will not be reimbursed without prior authorization from Purchasing Department.

Department	
Purchased By	Date of Purchase: mm/dd/yy
Department Head Approval	Date: mm/dd/yy
Explanation of Purchase(s)	
Total Amount of	Requested Reimbursement
Accounts to be Charged	
Account	Amount
ORIGINALS OF ALL IN	VOICES, REGISTER TAPES MUST BE ATTACHED. Hand carry to Cashiers Office
To be comp	pleted at the time reimbursement is made.
Disbursed by:	
Amount Received: \$	·