

COMMONWEALTH
 DEPARTMENTAL PETTY CASH FUND
 DISBURSEMENT REQUEST SUMMARY

DATE: _____

TO: Accounts Payable Department

FROM: _____
 Petty Cash Custodian's Name (TYPE NAME, THEN SIGN)

SSN: _____
 Petty Cash Custodian's University Identification Number (UIN)

SUBJ: Petty Cash Fund Reimbursement for Commonwealth Expenditures

Please reimburse my department's petty cash fund according to the Commonwealth funds (Ledgers 1XXXX, 3XXXX, 5XXXX and 7XXXX) expenditure summary listed below:

| <u>Budget Code</u> | <u>Sub-Object</u> | <u>Amount</u> |
|--------------------|-------------------|---------------|
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Subtotal from Attached Continuation Sheet (PC-2A) _____
 Total \$ _____

I have attached expenditure reimbursement forms with the proper receipts and authorizations for all items listed above. The Petty Cash Fund Reimbursement Reconciliation form is also attached.

I have reviewed this reimbursement for accuracy and completeness. All of the documentation appears to be proper.

 Signature of Reviewer of Reimbursement (no initials, no stamps)