



Petty Cash Reimbursement Form

Reimbursements of \$100 or less will be approved, as long as the club has full funds. Must attach original receipts.

Club Name _____ Date _____

Reimbursement Payment to:

Name _____ Phone _____

Address _____

Reason for Purchase: _____

Reimbursement Total: \$ _____

- The items are not over \$100.00
- Receipts have not been split to avoid the \$100.00 limit
- Original Receipt is Attached
- Student Life Coordinator has checked club balance
- Student Life Coordinator has ensured Form and Receipt are signed

The Reimbursement will be ready 48 - 72 hours (barring weekends, holidays and unexpected circumstances). The Advisor and Club will be emailed when it is ready.

Treasurer Signature

Advisor Signature

Acknowledge Receipt of Funds
Signature: _____
Printed Name: _____
Date: _____

For Student Life Center Office Use Only

Full GL Account Number _____

Cost Center Manager Signature

FOR CASHIERS OFFICE USE ONLY

Less than/equal \$100 Account has funds CC Manager/Account Match All receipts signed

Approved signed for cc manager requests

Initials _____ Date _____