

PETTY CASH REIMBURSEMENT RECEIPT

\$100.00 Limit Per Purchase

NOT VALID WITHOUT ORIGINAL RECEIPT ATTACHED

Receipts older than 30 days will not be reimbursed on this form-use a Claim Voucher

Vendor: _____ **Date:** _____

Description of purchased items and intended use:

Purchased by: _____ **Amount: \$** _____

Departmental approval required before reimbursement (stamped signatures not acceptable)

Department: _____ **Org Code:** _____

Approved By : _____ **Acct Code:** _____

Activity Code: _____

For Business and Accounting Services

Amount: _____

Reimbursed: _____

Cashier: _____

RF No.: _____

The above purchase was for official University of Idaho purposes, and I have received, in cash, the amount shown above.

Signature of Purchaser/Date