University of California San Diego

Request for Petty Cash Reimbursement

_____
(Date)

Please reimburse _____ for the following petty cash purchase.

Item (Quantity and description)	Purchased From	Amount
	Total:	

Index/Fund/Account to be charged: _____
(Index/Fund/Account)

Approved for payment: _____ _____
(Authorized Signature) *(Signature of Recipient)

*** If signature of recipient differs from purchaser, the following statements must be completed:**

_____ is hereby authorized to collect money for me. _____
(Name of Recipient) (Purchaser's Signature)

Rev. 08/91

everything above this line should be filled out by Barb Donovan

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**everything below this line should be filled out by the Global TIES student

Global TIES Reimbursement Form

For Dept. Use Only	
Index:	
Submitted:	
Initials:	
PayAuth #:	

Quantity	Item	Purchased From	Amount
		Total	

Name of person to be reimbursed:

_____