

**UNIVERSITY OF PENNSYLVANIA  
OFFICE OF THE COMPTROLLER  
REQUEST FOR REIMBURSEMENT OF PETTY CASH FUND**

5 DIGIT VENDOR NUMBER:

NAME OF CUSTODIAN: \_\_\_\_\_  
LAST FIRST

PETTY CASH ACCOUNT NUMBER: \_\_\_\_\_  
CNAC(3) ORG(4) BC(1) FUND(6) OBJ(4) PROG(4) CREF(4)

AMOUNT OF PETTY CASH FUND: \$ \_\_\_\_\_ DATE: \_\_\_\_\_

Expenditures, as indicated below and evidenced by the attached documentation, have been made out of the petty cash fund maintained by me and reimbursement in the amount of \$ \_\_\_\_\_ is requested. The attached documentation of all expenditure

Please make sure that the dollar amounts listed in the AMOUNT column (under expenditures) total to the figure recorded below as Total Expenditures.

Total Expenditures \_\_\_\_\_

Cash on Hand \_\_\_\_\_

Amount of Fund \_\_\_\_\_

Line #	26 DIGIT-ACCOUNT NUMBER(# of digits in category)							AMOUNT
	CNAC(3)	ORG(4)	BC(1)	FUND(6)	OBJ(4)	PROG(4)	CREF(4)	
1								
2								
3								
4								
5								
6								
7								
8								
9								
10								
<b>TOTAL AMOUNT:</b>								

<b>APPROVALS SECTION</b>		SIGNATURE OF CUSTODIAN	
SIGNATURE OF TRANSACTION AUTHORIZATION CARD (TAC) HOLDER		TYPE NAME OF TRANSACTION AUTHORIZATION CARD (TAC) HOLDER	
EMBOSSED IDENTIFICATION		SIGNATURE OF PAYEE	
		TYPE NAME OF PAYEE	
		PAYEE(TO BE SIGNED AT CASHIER'S WINDOW)	
DEPARTMENT NAME	DEPARTMENT ADDRESS	MAIL CODE	TELEPHONE
<small><b>TAC HOLDER RESPONSIBILITIES-</b> SIGNATURE OF THE TAC HOLDER INDICATES THAT THIS PAYMENT REQUEST IS IN COMPLIANCE WITH UNIVERSITY POLICY, IS AUTHORIZED FOR THE ACCOUNT BEING CHARGED, AND IS ACCURATE AND COMPLETE WITH REGARDS TO THE 26 DIGIT ACCOUNT CODE AND REQUIRED DOCUMENTATION.</small>			