PETTY CASH REQUEST

Office of Student Accounts (OSA) | Room 246, Lyle Hall |717-871-5102

Please complete the form as follows:

- (1) Attach original itemized receipt(s) showing the total amount requested not to exceed \$50 form.
- (2) The entire form, including signature of department head / financial manager must be completed.
- (3) The 'Requested By' and 'Authorized By' cannot be the same person.
- (4) Cash must be picked up in person at the OSA; requests cannot be fulfilled via inner-office mail.

Requested By:			Date:	
Purchased Item(s)		V	endor/Purchased From	Item Total
Total Reimbursement:			\$	
Reason for not using Pcard:				
	All purchases must adhere	to Procedure/Standa	ard Number 2011-07 Expenditures of Public Funds Guidelines,	Standards and Limitations
Please include: Department Name, GL/Co	mmitment Item, and Cost (Center <u>or</u> Int	ternal Order	
				Internal Order
	GL / Commitment	tem	Cost / Fund Center	/ WBS
Department Name	(6 digits)		(10 digits)	(6 digits)
Authorized by:				
Print			Signature	
Cash received by:				<u>-</u>
Print			Signature	
Date:		[Cash dispensed by:	