Petty Cash Reconciliation and Replenishment Form

Date:	
Department:	
Custodian:	

Cash on hand:	

Date	Vendor and Business Purpose	FUND	ORG	ACCT	ACTIVITY	AMOUNT

Sales receipts verified & cash disbursed by:

Signature: Date:

Total receipts	

Received by:

Signature: Date:

Total receipts and cash on hand:
Petty cash limit:

Reconciled by: _____

(Custodian)

Financial Manager's Approval: _____

1 copy to Department 1 copy to Financial Services