			Cashier	
Department	Customer	Department	Customer	
x1	x20	x1	x20	
x2	x50	x2	x50	
x5	x100		x100	
x10	coin	x10	coin	
	TOTAL		TOTAL	
Customer Signature		Customer Signature		
Reimbursement (Check List	Reimbursem	nent Check List	
For Receipts: Official receipt (Includes HST)		For Receipts:	For Receipts: Official receipt (Includes HST)	
Receipt date (must be during the current fiscal year)		Receipt	Receipt date (must be during the current fiscal yea	
Full account code (Location/Unit/Object/Fd/Fu)		Full acco	ount code (Location/Unit/Object/Fd/Fu)	
Description of	what the purchase is for	Descrip	tion of what the purchase is for	
Printed name	of approving Spending Officer	Printed	name of approving Spending Officer	
Signature of S	pending Officer	Signatu	re of Spending Officer	

PETTY CASH RELEASE					
Date	Cashier				
Department	Customer				
x1	x20				
x2	x50				
x5	x100				
×10	coin				
	TOTAL				
Customer Signature Reimbursement Check List For Receipts: Official receipt (Includes HST)					
Receipt date (must be during the current fiscal year)					
Full account code (Location/Unit/Object/Fd/Fu)					
Description of what the purchase is for					
	Printed name of approving Spending Officer				
	Signature of Spending Officer				
Be sure that the receipt does not exceed \$100 – Receipts exceeding \$100 should be processed through the Accounts Payable department					