

COE/CIS Petty Cash  
Requisition Form  
Maximum allowed - \$25

Pay to: \_\_\_\_\_

Amount: \_\_\_\_\_

Date: \_\_\_\_\_

\_\_\_\_\_ account number    \_\_\_\_\_ sub-account    \_\_\_\_\_ object code    \_\_\_\_\_ sub-object    \_\_\_\_\_ Project    \_\_\_\_\_ org ref ID  
*Required*

Business  
Justification for  
Petty Cash:

By signing below, I acknowledge and accept the responsibilities detailed in the COE/CIS Petty Cash Policy. Receipt must be attached for reimbursement. Sales tax is not reimbursable. Alcohol is a disallowed expense and may only be reimbursed per COE/CIS Alcohol Policy.

Requestor: Printed name: \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Department Approval: Printed name: \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Petty Cash Custodian: Printed name: \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_