

**DEPARTMENTAL PETTY CASH FUND REIMBURSEMENT**

**RECONCILIATION FOR THE MONTH OF** \_\_\_\_\_ **(Month)** \_\_\_\_\_ **(Year)**

Custodian: \_\_\_\_\_  
(Print and sign full name -- no initials, no stamps)

University Identification Number (UIN): \_\_\_\_\_

Budget Code: \_\_\_\_\_

Balance of Cash on Hand: \_\_\_\_\_

Outstanding Checks \_\_\_\_\_

Reimbursement Requests Submitted to AP  
    Reimbursement Not Yet  
    Received \_\_\_\_\_

Total **Commonwealth** Expenditures  
(Per Reimbursement Request Summary Form, PC-2) \_\_\_\_\_

Total **Local** Expenditures  
(Per Reimbursement Request Summary Form, PC-3) \_\_\_\_\_

Total Cash and Expenditures \_\_\_\_\_

Total Authorized Petty Cash Fund \_\_\_\_\_

Cash Over: \_\_\_\_\_ \*\*

Cash Short: \_\_\_\_\_ \*\*

\*\* The cash over/short amount will be charged to the budget noted above with sub-object code 5216.