

Bossier Parish Community College Petty Cash Reimbursement Request Form

Reimbursed Amount cannot exceed twenty-five dollars (\$25.00). Sales Tax charges are not reimbursable. Original receipt must be attached. All signatures required.

Date: _____

Amount of request: _____

Purpose of funds: _____

Accounting Codes to be charged:

DEPT	FUND	ORGN	ACCT	PROG

Requestor: _____ Date: _____
Originator

Approver: _____ Date: _____
Supervisor/Vice Chancellor

Expenditure Approval: _____ Date: _____
Vice Chancellor for Business Affairs

Funds Availability: _____ Date: _____
Budget Officer

Procurement Approval: _____ Date: _____
Director of Purchasing

For Business Office Use Only

Cash Amount Disbursed: _____

Distributed By: _____ Date: _____