

PETTY CASH EXPENDITURE SUMMARY

TO: FAS-cashmgmt@nau.edu

Gammage Building Room 226

Custodian name: _____

Date: _____

Dept Box Number _____

Custodian's Email: _____

INSTRUCTIONS: Please interoffice form to Financial Accounting Services (FAS), once approved the custodian will be notified that the funds are available at Student and Departmental Account Services (SDAS). See Policy [403-01 Petty Cash Funds](#).

Petty Cash Expenses

Date of Trans.	Description	Speedchart/Fund	Account	Amount
			TOTAL	

Supporting documentation (e.g. receipts) must be attached to this form before submitting to FAS.

Approved: _____
Dept Manager

Approved: _____
Supervisor

FAS verified: _____ Date: _____

By signing this, Employee is taking responsibility for funds

SDAS verified: _____ Date funds picked up: _____

Employee Name: _____ ID: _____