PETTY CASH EXPENDITURE SUMMARY

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Agency Name	Date Submitted	Check Requisition No.
Custodian	PERIOD COVERED	
Location	From To	

CASH RE-CEIPTS NO.	DATE	COST CENTER	OBJECT	OBJ. DTL.	PROJECT	AMOUNT
TOTAL THIS PAGE						$0.00
TOTAL THIS SUMMARY						
*PLUS REIMBURSEMENTS IN TRANSIT (*CHECK REQUEST NOT RECEIVED)						
PLUS CASH ON HAND						
TOTAL PETTY CASH FUND						$0.00