

# BARNARD COLLEGE PETTY CASH REPLENISHMENT or CLOSE REQUEST

Payee/Custodian \_\_\_\_\_

Department name \_\_\_\_\_

Check here if requesting replenishment of your petty cash advance.  
Please check **one** only (for replenishment check):

Hold at Office of the Bursar (007 Milbank Hall)

Return to department \_\_\_\_\_

Check here if closing your petty cash advance. Please complete this form and return all receipts via interoffice mail to the Finance Office (1320 Interchurch Center) or via email to vtoro@barnard.edu. Please contact Victoria to turn in the unspent cash.

Petty cash advance	\$	
Less cash on hand as of _____ (date)	\$	
Expenses	\$	<b>(A)</b>

**PLEASE ATTACH ORIGINAL RECEIPTS FOR EACH EXPENSE**

Expenses to be charged as follows:

FUND xx	FUNCTION-UNIT-PROGRAM xx-xxxx-xxxxxx	OBJECT CODE xxxxxx	AMOUNT
			\$
			\$
			\$
			\$
			\$
			\$
			\$
<b>Total expenses:</b> <i>(should be the same as (A) above)</i>			\$

Approved by (sign) \_\_\_\_\_  
(employee authorized to approve expenditures)

Date \_\_\_\_\_

Finance Office approval \_\_\_\_\_

Date \_\_\_\_\_

Voucher No. _____ J.E. No. _____ A.R. No. _____
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