Form F-5 Rev. 5/2014 Pay to:	UNIVERSITY OF ROCHESTER Date: PETTY CASH VOUCHER				
Fund #:					
Nature, Purpose of Expenditure			M (CMxxx) SC (SCxx	xxx) FAO (xxxxxxx	Amount
Department:		Tel E	xt (xxxxx):	Total	\$0.00
Department: Tel Ext (xxxxx): Received by: EMPLID #: Date: ATTACH ORIGINAL INVOICES OR RECEIPTS and submit within 90 days from the date of the expense.					
Requestor (print)	Requestor Title	Phone	Requestor	Signature	Date
Approver (print)	Approver Title Reviewed	Phone By (Cashier/Finan	Approver S	Signature	Date