

UNIVERSITY OF ROCHESTER PETTY CASH FUND SUMMARY

For Reimbursement

(a) Department: _____ Fund #: _____ Ext. (x-xxxx): _____

No.	Date (b)	Pay to: (Sig of Recipient) (c)	Nature, Purpose of Expenditure (d)	Amount (e)	Acct Key* (f)
1				\$ -	
2				\$ -	
3				\$ -	
4				\$ -	
5				\$ -	
6				\$ -	
7				\$ -	
8				\$ -	
9				\$ -	
10				\$ -	
11				\$ -	
12				\$ -	
13				\$ -	
14				\$ -	
15				\$ -	
TOTAL:				\$ -	

RECAP

*Key	CM (CMxxx) SC (SCxxxxx) FAO (xxxxxxxx) (g)	Amt (h)	Reconciliation (i)
A		\$ -	Cash on Hand: \$ -
B		\$ -	Plus Expenditures: \$ -
C		\$ -	Total Petty Cash Fund \$ -
		\$ -	
		\$ -	
	TOTAL	\$ -	

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
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Approver (print)	Approver Title	Phone	Approver Signature	Date
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Reviewed By (Cashier/Finance Office): _____

Expenditures and Petty Cash Funds are subject to audit at any time.

F-6 Petty Cash Fund Summary Instructions

Include all information as requested:

- a) Department Name, Petty Cash Fund Number (assigned when fund was established), and phone number of employee being reimbursed
- b) Dates of expense incurred*
- c) Name of research subject that was paid with petty cash. If petty cash was used to pay for misc. expenses enter the employee who used the petty cash to pay for the expense.
- d) Purpose or nature of expense - Description of the expense incurred
- e) Amount of expense
- f) Acct Key field - If there are multiple lines, enter the letter (A, B, C, etc.) for each expense that corresponds to the accounting key in the Recap section below.
- g) Enter the Company Code (CMxxx), Spend Category (SCxxxxx) and FAO (xxxxxxx) to charge the corresponding expenses
- h) Total amount charged to the accounting provided*. Verify the total in the recap section equals the total of the individual lines
- i) Reconciliation - Enter your total cash on hand (physical cash). The expenditures and Total Petty Cash Fund fields will auto-populate in the excel template. Verify your total petty cash equals the total amount of your established petty cash fund. If using the PDF version or a print out manually enter these amounts.
- j) Requestor Signature and Countersignature of supervisor, department chairperson or senior administrator are required.

Other Important Notes Regarding Petty Cash Reimbursements

- * Expenses must be submitted to the cashiering location within 90 days of incurring. If the expense falls outside of 90 days contact GeneralAccounting@UR.Rochester.edu to request reimbursement approval.
- * Expenses totaling \$300 or less can be reimbursed with this form at the SMH Cashier's Office, River Campus Bursar's Office or the Eastman School of Music Business Office (limited hours). Amounts in excess of \$300 must be processed through Accounts Payable on a Request for Payment Form (F-4).
- * Travel & Expense form (F-3) is no longer accepted at the cashiering locations effective 7/1/11. This form must be submitted through Accounts Payable Box 278958.
- * Original Receipts must be submitted as backup and taped to an 8-1/2 x 11 white sheet of paper
- * Only acceptable use expenses will be replenished via the F-6 form. Please see the Petty Cash Policy for restrictions on petty cash. The policy can be found at <https://www.rochester.edu/adminfinance/finance/policies/pettycash.html>