## **APPENDIX A – BURSAR'S FORMS**

A1. Request for Petty Cash Reimbursement

## PERALTA COMMUNITY COLLEGE DISTRICT REQUEST FOR PETTY CASH REIMBURSEMENT

From:		REQUESTING	STAFF MEMBER	Date:	Date:							
o:	_	NAME OF AC	TIVITY (CID)				ACTIVITY	NUMBER (CID)				
ttach	ed receipts			ollege busi	iness as indicated.							
	TE	DESCRIPTION					AMOUNT					
							TOTAL					
				DATE					REC'D BY			
		10	DA	TE								
)FFIC			DA	TE								
OFFIC			DA									
	0		DA									
	0	LY CODING	DA		Business		dget Approv	ral)				
Colleg	0	ent approvals	DA	7	3. Appr	Office (Bur		ral)				
Colleg	e/Departme		DA	DATE	3. Appr	Office (Bur	dget Approv signature	ral)	DATE			
Colleg	e/Departme	signature	DA	DATE	3. Appr	Office (Bur		ral)	DATE			
Colleg . App . App	e/Departmo proved	ent approvals	DA	7	3. Appr	Office (Bur		rol)	DATE			
Colleg . App . App	e/Departmo proved	signature	DA	DATE	3. Appr	Office (Bur		rol)	DATE			
Colleg . App . App	e/Departmo proved	signature	DA OBJECT	DATE	3. Appr	Office (Bur		ral) LINE CTR	DATT			
Colleg . App . App . App	e/Departma proved proved nt Number	SIGNATURE		DATE	3. Appr	Office (Bur	SIGNATURE					
Colleg . App . App	e/Departma proved proved nt Number	SIGNATURE		DATE	3. Appr	Office (Bur	SIGNATURE					