

Mott Community College

Petty Cash Reimbursement Form

Reimbursements of \$100 or less will be approved, as long as the club has full funds. Must attach original receipts.

Club Name _____ Date _____

Reimbursement Payment to:

Name _____ Phone _____

Address _____

Reason for Purchase: _____

Reimbursement Total: \$ _____

- The items are not over \$100.00
- Receipts have not been split to avoid the \$100.00 limit
- Original Receipt is Attached
- Student Life Coordinator has checked club balance
- Student Life Coordinator has ensured Form and Receipt are signed

The Reimbursement will be ready 48 - 72 hours (barring weekends, holidays and unexpected circumstances). The Advisor and Club will be emailed when it is ready.

Treasurer Signature

Advisor Signature

For Student Life Center Office Use Only

Full GL Account Number _____

Cost Center Manager Signature

Acknowledge Receipt of Funds

Signature:

Printed Name:

Date:

FOR CASHIERS OFFICE USE ONLY

- Less than/equal \$100
- Account has funds
- CC Manager/Account Match
- All receipts signed
- Approved signed for cc manager requests

Initials _____ Date _____