## PETTY CASH REQUEST FORM

Description of item(s) to be purchased and re	ason as per Board Policy #6620.
Approximate amount of reimbursement:	
After approval return this form with receipts reimbursement will not include any taxes.	to Carolyn to receive your cash. Please note that
Requested by:	
	Date
Approved by:	
Principal/Supervisor	Date
Received cash:	
	 Date
Account Number to be charged:	