THE UNIVERSITY OF TEXAS
SOUTHWESTERN MEDICAL CENTER AT DALLAS

PETTY CASH RECEIPT

ATTACH CASH TICKET OR RECEIPT TO THIS FORM

VENDOR NAME: _____

_____

_____

DATE _____

DEPT. _____

ACCOUNT NO. _____

REQUISITION NO. _____

QUANTITY	DESCRIPTION	PRICE	

Purchase of commodities with an aggregate total not exceeding $50 may be made by employees with reimbursement requested from the Cashier. (Handbook of Operating Procedures 7.7.2.D)

In unusual circumstances purchases over $50 can be made; however, these require the approval of the Director of Purchasing.

1. APPROVED _____
Principal Investigator

2. APPROVED _____
Director of Purchasing

3. RECEIVED BY _____

TELEPHONE _____

Distribution: White - Cashier, Goldenrod - Department