

Please use these helpful tips when completing your form:

Total can not exceed \$50.00 (without tax)

Original **itemized** receipts must be attached

Shipping charges cannot be included for petty cash reimbursement

Complete CFS Chartstring information – Account, Fund, Department ID, and Class (if applicable)

Correct fund must be used for reimbursement

Approver needs direct pay authorization for this department

Business Hospitality Expense must include: [Hospitality Justification Form](#)
([Business Hospitality Expense Procedures](#))

Gift Card- Gift Card Approval form must be attached: [\(Gift Card Pre-Approval Form\)](#)

Examples of Restricted Items:

- Alcohol
- Printing
- Rubber stamps
- Postage stamps
- Textbooks
- Shipping
- Travel expenses
- Toner cartridges
- Communication devices



Petty Cash Reimbursement

Employee/Purchaser

Department

Date

Department Contact & Phone Number

Quantity	Item	Unit Price	Amount

Please Note: **Original Receipt(s)** must be attached.

Yes No **Gift Card?**

Yes No **Business Hospitality Expense?**

If Yes, the required forms below must be included:

- [Gift Card Pre-Approval Form](#)
- [Hospitality Justification Form](#)

Alcohol cannot be reimbursed by petty cash

Complete CFS ChartString

Account	Fund	Dept. ID	Class

Employee & Approver:

I hereby certify that the above goods and/or services were received by and necessary for use of Sacramento State and that quantity and quality are as indicated.

Sub Total

Tax (if not included)

Total

****Funds can only be reimbursed to employee below****

Employee _____
Original Signature _____ Date _____

Approved by _____
Original Signature _____ Date _____

Printed Name of Approver

TO BE USED BY BURSAR'S OFFICE TO ACKNOWLEDGE REIMBURSEMENT

Reimbursement of the total amount herein shown is hereby acknowledged:

Employee OneCard Verified

Cashier Signature _____
Date _____

Receipt of the total amount is hereby acknowledged:

Employee Signature _____
Date _____