

PEQUANNOCK TOWNSHIP BOARD OF EDUCATION

SCHOOL LEVEL
PETTY CASH REQUEST FORM
PLEASE PRINT

Name of Requestor: _____

School/Department _____

Date: _____ Amount: \$ _____

Purpose of Petty Cash (SPECIFIC):

Budget account to be charged: _____ - _____ - _____ - _____ - _____

Requestor's Signature

Office Use Only

Approved _____

Denied _____

Reason _____

Principal

Date

**Form to be kept with petty cash log and turned into Business Office upon reconciliation.*