UNIVERSITY OF TORONTO

PETTY CASH / IMPREST EXPENDITURE BANK ACCOUNT REQUEST FOR REIMBURSEMENT/CLOSURE/DECREASE

PAYABLE TO: **1**

PERSONNEL NO. **2**

REQUIRED ACTION: **4**

- CLOSE FUND
- REIMBURSE/REPLENISH
- DECREASE FUND:
  - BY: $

DATE: **5**

DOCUMENT NO.: **6**

PERIOD: **7**

FROM:

TO:

ADDRESS OF PAYEE: **3**

ACCOUNTING INFORMATION

BUSINESS AREA IF OTHER THAN 1000 **8**

VENDOR(CUSTODIAN) ACCOUNT NUMBER: **9**

COMPANY CODE IF OTHER THAN UOFT

CURRENCY:
- CANADIAN DOLLARS **10**
- U.S. DOLLARS

DATE	G/L ACCOUNT NO.	TAX CODE	AMOUNT	COST CENTRE ACCTG COST CENTRE INTERNAL ORDER (O R)	FUNDS MANAGEMENT ACCOUNTING FUND (AND /OR)	C/F CENTRE	COMMITMENT ITEM	DESCRIPTION
11	**12**	**13**	**14**	**15**	**16**	**17**	**18**	**19**

REIMBURSEMENT REQUIRED $ **20**

UNIDENTIFIED CASH(OVER) OR SHORT $ **21** -

FUNDS ON HAND **22**

TOTAL IMPREST FUND $ **23** -

REQUESTED BY: **24**

TELEPHONE:

FAX:

AUTHORIZED APPROVAL: **25**

SIGNATURE

TITLE **26**

Field Number	Field Name	Step Description
1.	Payable To	Enter the name of the University staff (Custodian)
2.	Personnel No.	Enter the personnel number associated with the name of the Custodian
3.	Address of Payee	Custodian's University address including room number, where necessary
4.	Required Action	Select One: Close Fund – Reimburse/Replenish – Decrease Fund – By: State the $ Amount
5.	Date	Enter the date the form is completed
6.	Document No.	Enter the system generated document number upon posting to FIS
7.	Period	Period of time the expenditures were incurred – From is the date of the first transaction for the form; To is the date of the last transaction for the form
8.	Business Area	For U of T excluding Ancillaries enter 1000
9.	Vendor (Custodian) Account Number	Enter the Custodian (Vendor) Number. Each Custodian is assigned a 7xxxxx series vendor number when the petty cash is set up
10.	Currency	Enter the currency, CDN or USD. Petty Cash is only in CDN. Imprest Accounts can be either CDN or USD.
11.	Date	Enter the date of the receipt that the expense occurred
12.	G/L Account	Enter the appropriate General Ledger account: 8xxxxx series for expense
13.	Tax Code	Enter the tax code that reflects the applicable HST. For expense type G/L accounts (8xxxxx) series use an input tax code starting with an "E"
14.	Amount	Enter the total amount of the receipt for the expense incurred (including taxes)
15.	Cost Centre OR Internal Order	Enter either the applicable cost centre or internal order but not both
16.	Fund	If applicable enter the Fund number
17.	Fund Centre	Enter the applicable Fund Centre
18.	Commitment Item	Fill in only if you are changing the default commitment item. I.E. – spending budget is loaded onto different commitment item – EXP-UFTA, SPECIAL1, etc.
19.	Description	Enter a description of the expense
20.	Reimbursement Required	Total of the expenses to be reimbursed
21.	Unidentified Cash (Over) or Short	Use when closing or decreasing Petty Cash and Imprest Funds. Enter the amount of money that will be remitted to Financial Services.
22.	Funds on Hand	Total value of the Petty Cash
23.	Total Imprest Fund	Total value of the Imprest Fund
24.	Requested By	Enter the name of the individual completing the form. Include their phone and fax numbers
25.	Authorized Approval Signature	Enter the name of the person authorized to approve the claim (delegated signing authority) and have them sign to approve the completed claim form
26.	Authorized Approval Title	Enter the title of the person authorized to approve the claim