



RIVERWATCH PTSO PETTY CASH REQUEST/RECEIPT 2024 - 2025

Petty Cash Request:

Person requesting: _____ Date: _____

Phone number: _____ Email: _____

Reason Petty Cash is needed: _____

Date/time needed by: _____

Coins _____ _____ _____ _____	X .01 = _____ X .05 = _____ X .10 = _____ X .25 = _____	Total Coins \$ _____
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Currency _____ _____ _____	X 1.00 = _____ X 5.00 = _____ X 10.00 = _____	+ Total Currency \$ _____ = Total Amount of Petty Cash requested \$ _____
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Note: Please complete this form at least 5 business days prior to your event. After this form is completed, please place it in the PTSO mailbox in the front office and notify the president via email at RiverwatchMSPTSO@gmail.com. Petty cash will be delivered to RMS and placed in the PTSO cash box in the school vault before your event. Thank you!

Signature of requester: _____

PTSO President approval: _____ Date: _____

Petty Cash Receipt: (signature of two verifiers required - cannot be related and cannot be the treasurer)
By signing this form, you are certifying that these funds were received and properly accounted for.

Signature: _____ Signature: _____

Date: _____ Date: _____

FOR TREASURER'S USE ONLY

Date issued: _____ Check number: _____

Comments: _____

Treasurer's signature: _____