Petty Cash Recoup Template

HiFlex Physio

Petty Cash Recoup Summary for _____

(Insert name of Petty Cash Custodian, Faculty or Unit and phone number)

From (Date) to (Date)

Date	Issued To	Description	Coy	Org Unit	Loc	Activity	Nat Account	GST Amt	Total Invoice Amount

Total Recoup claimed	
Total Cash on Hand	
Total Recoups in Transit	
Total Unacquitted Advances	
Less Accountable Amount of Float	
Equals Zero when Float is Balanced	