(1) TRANSACTION CODE	(1) D/C	(2) BATCH NUMBER	(3) NEW / BATCH
54	3		

STATE OF NEW JERSEY
DEPARTMENT
OF THE TREASURY
ACCOUNTING BUREAU

(4) FISCAL YEAR	(5) TRANSACTION DATE	(6) DOC TYP	(7) DOCUMENT NUMBER	(8) SELECT INDICATOR
		P		

PETTY CASH FUND REIMBURSEMENT

PETTY CASH FUND AND MAILING ADDRESS
(9) NAME, STREET, CITY, STATE, ZIP CODE

(10) COMMODITY CODE	(11)	(12) PETTY CASH FUND IDENTIFICATION NUMBER	(13) CHECK SORTER	(14) CHECK NUMBER
5 9 9 9	P	0 0		

(15) Account Number				(16)	(17)	(18)	(19)		ACCOUNTING USE ONLY	
ORGANI-ZATION	FUND	PROGRAM	OBJECT	COST CENTER	PROJECT ACTIVITY	EXTENDED NUMBER	AMOUNT		(20) ERROR SUSPENDED NUMBER	(21) DEL / REPL
						TOTAL REIMBURSEMENT				

INSTRUCTIONS: (ALSO SEE PROCEDURES MANUAL)

RECEIPTED VOUCHERS WHERE POSSIBLE MUST ACCOMPANY THIS DOCUMENT.

DO NOT INCLUDE WAGES OF DISCHARGED EMPLOYEES IN THIS ACCOUNT.

ADDING MACHINE TAPE MUST BE INCLUDED WHERE APPROPRIATE FOR EACH ACCOUNT.

I certify that the above expenses are just and correct; that the expenditures stated have been made lawfully and in the performance of duty relating thereto as contemplated by the act creating said fund; that no bonus has been given, received or promised in connection therewith, and that all expenditures are in accordance with NJ Treasury Circular Letter 05-03-OMB and related Circular Letters, NJ Treasury and Department Fiscal Policies, and applicable State Statutes.

REQUESTED BY:	DEPARTMENT / AGENCY APPROVAL
SIGNATURE	SIGNATURE
TITLE DATE	TITLE DATE