

CITY OF EUREKA • PETTY CASH

Employee: _____

Department: _____

Account No.: _____ Date: _____

DESCRIPTION OF PURCHASE: _____

Amount Advanced: \$ _____

Actual Purchase Amount: \$ _____
(Receipts documenting the actual purchase amount must be provided)

Amount Due City: \$ _____

Amount Due Employee: \$ _____

Approved By: * _____ Date: _____

City Manager: * _____ Date: _____

Received By: _____ Date: _____