 **COMSATS University Islamabad (CUI), Lahore Campus**

 Defense Road, Off Raiwind Road, Lahore

UAN:042-111-001-007 Ext: 818-819 Tel; 042-99204779

 Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Petty Cash Reimbursement Form**

 CUI-LHR-/ACC/PTYCASH/01

Department Name …………………………

Name (Petty Cash Custodian)………………………….. Cash Limit (Rs.)…………….

|  |  |  |  |
| --- | --- | --- | --- |
| **Sr. #** | **Description with purpose** | **Expense(s) Nature** | **Amount (Rs.)** |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  **Grand Total:**  |  |
| **In words:**  |

 **Recommended by (Custodian/HOD)**

 Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*[For official use only]*

|  |
| --- |
| **Checked By: MEHDI RAZA (Asst. Treasurer) Signature:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_****Approved by: Nagina Sahfi (Additional Treasurer) Signature:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** |

**Bank Payment Voucher**

 Voucher No……………

Pay to:…………………………………….. Amount (Rs.)…………

Bank A/c………………………… Cheque No:………………………….. Date………………..

Income tax………………….. GST……………….. RM……………..….

**Posted By:**

Name: **Abdul Rahim** Signature:……………………… Date……………………..