



ALAMO COLLEGES

SAN ANTONIO COLLEGE Business Office

PETTY CASH VOUCHER

Date : _____

FOAP : _____
Fund Org Account Program

Department Name : _____

Department Phone : _____

Amount : _____

Explanation / Purpose : _____

Attach Original Receipt
No Receipt over 30 days old

will be processed

One Receipt/ Petty Cash Form

Hours for Disbursement of Funds

Monday - Friday

9:00 A.M - 11:00 AM

2:00 P.M - 4:00 PM

** Reimbursement of Funds from approved Walk-in Vendors only **
\$100.00 Limit.

\$ Attach Receipts Dean's Signature

Department Head Signature

Bursar's Staff

Recipient's Signature

Recipient's Printed Name



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