



PETTY CASH ACCOUNTABILITY FORM

SETUP				
<p>I certify that as of _____, I, the undersigned, will have in my possession or under my control a continuing advance of \$ _____ from Southern Health-Santé Sud at _____.</p> <p style="text-align: right; font-size: small;">(DATE) (LOCATION)</p>				
INCREASE/DECREASE				
<p>I certify that as of _____, I, the undersigned, will have in my possession or under my control a continuing advance of \$ _____ from Southern Health-Santé Sud at _____ due to:</p> <p style="text-align: right; font-size: small;">(DATE) (LOCATION)</p> <p>a decrease an increase</p> <p>from \$ _____ to \$ _____.</p>				
WAIVER/TRANSFER				
<p>I certify that as of _____, I, _____, am waiving responsibility for Petty Cash at _____ and transferring to _____ at _____.</p> <p style="text-align: right; font-size: small;">(DATE) (NAME) (LOCATION) (NAME)</p> <p>I, _____, accept the transfer and will now have in my possession or under my control a continuing advance of \$ _____ from Southern Health-Santé Sud at _____.</p> <p style="text-align: right; font-size: small;">(NAME) (LOCATION)</p>				
DISCHARGE				
<p>I certify that as of _____, I, the undersigned, will have discharged my obligation of a continuing advance of \$ _____ from Southern Health-Santé Sud at _____, via:</p> <p style="text-align: right; font-size: small;">(DATE) (LOCATION)</p> <table style="width: 100%; margin-top: 10px;"> <tr> <td style="width: 60%;">Repayment of</td> <td style="text-align: right;">\$ _____</td> </tr> <tr> <td>Submission of expenditure documentation totaling</td> <td style="text-align: right;">\$ _____</td> </tr> </table>	Repayment of	\$ _____	Submission of expenditure documentation totaling	\$ _____
Repayment of	\$ _____			
Submission of expenditure documentation totaling	\$ _____			

Date _____ Name _____ Signature _____

Date _____ Name _____ Signature _____
(SUPERVISOR)

REQUIRED FOR WAIVER/TRANSFER ONLY

Date _____ Name _____ Signature _____

Date _____ Name _____ Signature _____
(SUPERVISOR)