

## Marcus Institute - Request for Payment: Petty Cash

**\*\*This form is for use by Marcus Institute employees and all non Marcus Institute sponsored accounts\*\***

To: Fiscal Services Account#: \_\_\_\_\_

From: Employee Requesting Payment Date of Request: \_\_\_\_\_

Ext. #: \_\_\_\_\_ Department: Marcus Institute

**THIS FORM IS TO BE USED FOR AMOUNTS UP TO \$25.00 ONLY.** Original invoices and/or receipts to document expenses must be attached to this form. Submit this form to the Fiscal Cashier's Desk. Recipients will notified by E-mail within 2 business days for pickup.

- 1) Description of services/supplies/expenses and business purposes:  
\_\_\_\_\_
  
- 2) Total Amount requested: \$ \_\_\_\_\_
- 3) Signatures required for payment
 

a) _____ Employee requesting payment	d) _____ Grant Manager
b) _____ Authorized Account Signatory	e) _____ Vice President of Research Administration (for requests over \$2,000)
c) _____ Employee's Supervisor (*if different from Account Signatory)	
  
- 4) Received by:
  - a) \_\_\_\_\_  
Employee picking up payment
  - b) \_\_\_\_\_  
Date