PETTY CASH RECEIPT

RECEIPT NO.

Office of Juvenile Justice

Facility Name _____

ORGANIZATION	OBJECT	SUB. OBJ.	RPTG. CAT.	AMOUNT	DESCRIPTION OF ITEMS
CHECK NO.		**AMOUNT OF CHECK**	0	CHECK DATE	

RECEIVED BY _____ DATE _____ TITLE _____

APPROVED BY _____ DATE _____ TITLE _____