

RESEARCH GRANTS PETTY CASH

Form Reference

BATCH

ENDING DATE

d	d	m	m	y	y		

CLASS **Miscellaneous Transactions**

EMPLOYEE NAME (optional)

ORGANIZATION

Expenditure ending date

d	d	m	m	y	y		

EXPENDITURE ITEM DATE (ddmmmyy)	PROJECT NUMBER	TASK NO	AWARD NUMBER	EXPENDITURE TYPE (see below)	QUANTITY (£.p)	COMMENT	FLEXFIELD																				
							COST CENTRE		SOURCE OF FUNDS			TRANS - ACTION TYPE															
				R G				A	A	A	A	A	A	E	Z	Z	H										
				R G					A	A	A	A	A	A	E	Z	Z	H									
				R G						A	A	A	A	A	E	Z	Z	H									
				R G							A	A	A	A	A	E	Z	Z	H								
				R G								A	A	A	A	A	E	Z	Z	H							
				R G									A	A	A	A	A	E	Z	Z	H						
				R G										A	A	A	A	A	E	Z	Z	H					
				R G											A	A	A	A	A	E	Z	Z	H				
				R G												A	A	A	A	A	E	Z	Z	H			
				R G													A	A	A	A	A	E	Z	Z	H		
				R G														A	A	A	A	A	E	Z	Z	H	
				R G															A	A	A	A	A	E	Z	Z	H
				TOTAL																							

TO BE ENTERED ON THE PETTY CASH IMPREST FORM

GMS : EXPENDITURE TYPES

TRAVEL		TRAVEL HOME	TRAVEL SUBSISTENCE	TRAVEL - CONFERENCE	TRAVEL FOREIGN	OTHER COSTS		OTHER CONSUM-ABLES	OTHER MISCELL - ANEOUS	OTHER - ANIMALS	EQUIPMENT		EQUIPMENT (< £10,000)	COMPUTING COSTS		COMPUTING COSTS
EXCEPTIONAL		EXCEPTIONAL - TRAVEL	EXCEPTIONAL - OTHER COSTS		EXCEPTIONAL - EQUIPMENT	COORDINATION COSTS (EC ONLY)		COORDINATION TRAVEL	COORDINATION OTHER COSTS	COORDINATION EQUIPMENT						

